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Board of Pharmaceutical Specialties



2009 Candidate's Guide

Specialty Certification in:

Nuclear Pharmacy

Nutrition Support Pharmacy

Oncology Pharmacy

Pharmacotherapy

Psychiatric Pharmacy

Test Date: October 3, 2009

Application Deadline: August 1, 2009

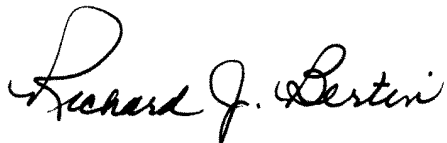
bps Board of Pharmaceutical Specialties

Thank you for your interest in becoming certified in your chosen field of specialty practice. As the delivery of health care becomes more sophisticated and more complex, there is a concomitant need for pharmacy to identify practitioners who are qualified to meet these challenges. The recognition of areas of specialized practice and the certification of pharmacist specialists go a long way towards assuring society that its pharmaceutical care needs are being properly addressed.

For more than 30 years, the Board of Pharmaceutical Specialties has provided specialty-level certification programs for pharmacists - both nationally and internationally. The founding of BPS by APhA in 1976 resulted from a five-year effort during which the entire profession studied and deliberated the issue of specialization in pharmacy. Nuclear pharmacy, nutrition support pharmacy, oncology pharmacy, pharmacotherapy and psychiatric pharmacy exist today as bona fide specialties due to ongoing collaborative efforts by all segments of the profession.

The Board, with assistance from several professional organizations and their members, has continued to provide vital leadership and support for the recognition of specialties and the certification of pharmacist specialists. As a result, BPS and its Specialty Councils are now the principal entities through which these activities are carried out for the pharmacy profession. Each of the Specialty Councils works diligently with test development consultants to ensure that the entire certification process is psychometrically sound and legally defensible. BPS is also working with its strategic partner organizations to promote the value of specialty recognition and certification to the profession, other health care professionals, employers, and the public.

Quality pharmacist care requires a cadre of well-trained, experienced, and motivated pharmacists. Your interest in specialty certification illustrates your commitment to advancing our profession. BPS salutes your interest and commitment to quality patient care. The American public requires nothing less of our profession.



Richard J Bertin, PhD, RPh
Executive Director

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GENERAL INFORMATION

Board of Pharmaceutical Specialties

The Board of Pharmaceutical Specialties (BPS) is an independent non-governmental certification body that provides recognition of persons involved in the advanced practice of pharmacy specialties. BPS was created on January 5, 1976 by the American Pharmaceutical Association (now the American Pharmacists Association, APhA), and exists today as an autonomous division of APhA.

The Board is composed of eight pharmacists, five of whom represent BPS specialty practices, two health care professionals other than pharmacists and one public member. The Executive Director and one member of the APhA Board of Trustees are non-voting Board members, ex officio.

BPS establishes a Specialty Council for each recognized specialty. Specialty Councils work with the Board to develop and administer psychometrically sound and legally defensible certification processes, consistent with public policy regarding the credentialing of health care professionals. A Specialty Council is composed of six pharmacists practicing in the specialty area and three other pharmacists.

The Five Point Purpose of the Board of Pharmaceutical Certification Program is:

1. To grant recognition of appropriate pharmacy practice specialties based on criteria established by the Board of Pharmaceutical Specialties;
2. To establish standards for certification and recertification of pharmacists in recognized pharmacy practice specialties;
3. To grant qualified pharmacists certification and recertification in recognized pharmacy practice specialties;
4. To serve as a coordinating agency and informational clearing house for organizations and pharmacists in recognized pharmacy specialties;
5. To enhance public/consumer protection by developing effective certification programs for specialty practices in pharmacy.

Importance of Certification

The primary purpose of specialization in any health care profession is to improve the quality of care individual patients receive, to promote positive treatment outcomes, and ultimately, to improve the patient's quality of life. Specialties evolve in response to the development of new knowledge or technology that can affect patient care. The rapid, dramatic advancement in drug therapy in recent decades has created a clear need for pharmacy practitioners who specialize in specific kinds of treatment and aspects of care. Specialty certification is a responsible, progressive initiative from the profession to try to ensure the best possible patient care.

Specialty certification in pharmacy offers numerous potential benefits and significant value to patients, other health care professionals, employers, health care systems, and the general public. Pharmacists certified in a specialty area are highly trained, highly skilled professionals who have clearly demonstrated their ability to identify, resolve, and prevent drug therapy problems in their practice areas. They have taken

the initiative to seek additional education and experience in a specialized pharmacy field, exhibiting a high level of commitment to the patients they serve and to the profession of pharmacy. Certified pharmacist specialists function as valuable members of treatment teams. Employers can feel secure that the knowledge base and skill levels of the certified pharmacist specialists they hire have been tested through a rigorous, objective, peer-determined process.

Certification can also provide a personal reward for pharmacist specialists. Preparing for the certification exam offers an opportunity to increase advanced, specialized knowledge in the practice area. Specialty certification is a means of informing other professionals of the individual's educational and practice accomplishments, setting the specialist apart from colleagues. It is one way to demonstrate advanced knowledge and skills independent of, and in addition to, a degree program or license. Many certificants have reported enhanced respect from colleagues in other health care professions. Others tell of a "competitive edge" in applying for jobs. Many pharmacist specialists certified by BPS have also reported increased salaries or one-time bonuses. Still others have received payment from third party payers because their skills and knowledge are validated through certification.

Health care organizations have documented many cases in which the services of certified pharmacist specialists may have contributed in large measure to tangible results, including:

- Optimal use of drugs;
- Substantial reduction in adverse drug reactions;
- Fewer complications related to drug treatment;
- Shorter hospital stays (resulting in lower hospital costs);
- Reduced morbidity and mortality;
- Reduced unnecessary medication use (resulting in lower drug costs);
- Improved laboratory monitoring of drug therapy; and
- Improved patient satisfaction.

Recognition of BPS Certification

BPS-certified pharmacist specialists are recognized for their advanced level of knowledge, skills, and achievement by many government agencies and educational organizations. Following are examples of specific benefits that may be realized by BPS-certified pharmacist specialists:

- U.S. Nuclear Regulatory Commission: specialists may be recognized as Authorized Nuclear Pharmacists
- U.S. Department of Defense: specialists may receive bonus pay
- U.S. Department of Veterans Affairs: specialists may serve at a higher pay step
- U.S. Public Health Service: specialists may receive bonus pay
- New Mexico and North Carolina State Boards of Pharmacy: specialists may apply for specified prescribing privileges

Many schools/colleges of pharmacy award advanced placement in non-traditional PharmD programs on an individual basis and may recognize BPS certification in this process. Increasing numbers of employers are recognizing BPS-certified specialists with monetary reward or promotion/hiring preference.

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OVERVIEW

This Candidate's Guide is intended for use by pharmacists who are interested in being certified as specialists by the Board of Pharmaceutical Specialties (BPS) in any of the BPS-recognized specialty practice areas. This Guide provides information on BPS certification processes: eligibility requirements, application procedures, examination administration, annual registration, and recertification.

This document is ONLY A GUIDE. The information, procedures, and fees detailed in this publication may be amended, revised, or otherwise altered at any time and without advance notice by the Board of Pharmaceutical Specialties. The provision of this Guide does not confer any rights upon an applicant. The information contained in this Guide supersedes information contained in all previous editions of the BPS Candidate's Guide.

All correspondence and requests for information concerning the administration of BPS specialty certification examinations should be directed to:

Board of Pharmaceutical Specialties

1100 Fifteenth Street, NW, Suite 400
Washington, DC 20005
TEL 202-429-7591 • FAX 202-429-6304
bps@aphanet.org • www.bpsweb.org

Note: as of April 25, 2009 mailing address will be
2215 Constitution Avenue, NW
Washington, DC 20037

It is the candidate's responsibility to submit a fully completed application by the stated postmark deadline of August 1. Incomplete applications or those submitted after the indicated deadline may be returned to candidates without being processed.

Non Discrimination Policy

BPS endorses the principles of equal opportunity and nondiscrimination. BPS does not discriminate with regard to age, sex, ethnic origin, race, religion, disability, marital status, veteran status, sexual orientation, or any other category protected by federal or state law.

APPLICATION INFORMATION

General Information

All questions pertaining to BPS certification should be directed to the Board as noted above. BPS office hours are Monday through Friday, 8:30am-5:00pm (Eastern Time). The Board offices are closed on all federal holidays.

Applications on paper must be accompanied by a check, cashier's check, money order, or credit card account number. Purchase orders will NOT be accepted.

First-time applicants are encouraged to submit their applications online from the BPS web site (www.bpsweb.org). NOTE: This is an option for first-time applicants ONLY. A valid credit card account number is required for all online applications. The

online application process uses a secure server.

Applications may be submitted by facsimile (FAX) with payment charged to a valid credit card account (American Express, MasterCard, VISA). A faxed copy of a check is NOT acceptable. Do not mail a hard copy of an application transmitted by facsimile.

It is the candidate's responsibility to submit an application that is completely and accurately filled out. Incomplete applications will not be processed. It is the candidate's responsibility to ensure that the application is submitted by the postmark deadline of August 1. All applications are processed within 20 working days of receipt. Applications submitted after the August 1 deadline may be returned unprocessed.

Name and/or Address Changes

The applicant/candidate or certificant is responsible for immediately notifying BPS of any address change or legal name change. Notification for admission to the examination, mailing of test results, maintenance of certified status and renewal of certification depend on the Board having current information. An applicant/candidate or certificant that legally changes his/her name should immediately notify BPS by mail and enclose a copy of a government issued document reflecting the legal name change. The documentation (such as a marriage certificate) must be issued by a federal, state, or local government.

IMPORTANT DATES

Deadline for requesting an alternate site* or alternate date**

July 1, 2009

July 1, 2010

Postmark deadline for applications

August 1, 2009

August 1, 2010

Last day to withdraw or change test site

September 1, 2009

September 1, 2010

EXAMINATION DATE

October 3, 2009 (All BPS Specialties)

October 2, 2010 (All BPS Specialties)

Test Sites see page 6

**A group of ten (10) or more applicants may request that an examination be administered at an alternate site. Requests for alternate sites in Alaska, Hawaii and foreign countries will be reviewed on a case by case basis, if the requirement of 10 candidates cannot be met. Complete details on requesting an alternate examination site, including appropriate forms, are available from BPS. Requests for alternate sites, along with all application forms, must be submitted, in writing, no later than July 1.*

*** Candidates, who because of religious reasons cannot sit for an examination on Saturday, may request an alternate test date. See page 6 for details.*

Test Dates

The dates of upcoming BPS Specialty Certification Examinations are **Saturday, October 3, 2009 and Saturday, October 2, 2010**. All BPS specialty certification examinations are administered once a year, on the same date, at the same sites. While BPS examinations are normally administered on Saturdays, BPS policy does provide for an alternate test date (normally the following Sunday) for religious reasons (see below).

Alternate Test Date

BPS will provide an alternate date for administration of certification examinations in order to accommodate candidates whose religious affiliations prevent them from participating in an examination on a Saturday. The alternate date is usually the Sunday immediately following the administration of the examination (October 4, 2009 and October 3, 2010). The fee to secure and staff a test site on an alternate date is \$750, payable by the requestor. This fee is in addition to the certification application fee.

Requests for an alternate date administration must be submitted in writing to BPS, along with the completed application and appropriate fees. This request is due on or before July 1. The request must be accompanied by an original letter, on letterhead, from a leader of the applicant's religious community indicating specific reasons for the request. All candidates requesting an alternate test date will be advised of their eligibility to sit for the examination, as well as their test date and site by August 1.

Test Sites

BPS will establish test sites in at least twenty cities for the administration of its specialty certification examinations in 2009. Notification of the exact location of testing room is provided with the candidate's Admission Permit and posted on the BPS web site. Applicants must indicate their preferred test site in the space provided on the application form.

The Board reserves the right to cancel a site if there is an insufficient number of applicants for the site. BPS also reserves the right to close a test site to those who wish to change test sites after the application deadline (August 1), if the number of original applicants fills a site to capacity.

Test Sites

Atlanta, GA	Memphis, TN
Baltimore, MD	Miami, FL
Boston, MA	Minneapolis, MN
Dallas, TX	Pittsburgh, PA
Denver, CO	San Francisco, CA
Chicago, IL	Phoenix, AZ
Detroit, MI	Seattle, WA
Chapel Hill, NC	Philadelphia, PA
Houston, TX	St. Louis, MO
Los Angeles, CA	Tampa, FL

The Board does not provide hotel or travel recommendations. Candidates are encouraged to use their own travel agent or one of the search engines on the world wide web to locate hotel accommodations near a test site, maps, and driving instructions for a particular test site.

DANTES Program

Overseas military pharmacists may sit for BPS certification using the DANTES program through the Military Education Centers. For additional information, contact BPS directly or visit www.dantes.doded.mil

Alternate Test Sites

Any group of ten or more interested individuals may request an alternate test site. The applicant group may represent any combination of BPS-recognized specialties (Nuclear Pharmacy, Nutrition Support Pharmacy, Oncology Pharmacy, Pharmacotherapy, and Psychiatric Pharmacy). The applicant group may contain candidates for both certification and recertification examinations.

Within the contiguous 48 states: Applicant groups must have at least 10 individuals committed to sitting for a BPS exam. No additional fee will be charged for establishing an alternate test site in the contiguous 48 states. Alternate exam sites must be at least 200 miles from any of the BPS-designated test sites listed above.

Alaska, Hawaii, Puerto Rico and foreign countries:

Groups with fewer than 10 applicants in Alaska, Hawaii, Puerto Rico and foreign countries that request an alternate site will be required to pay a proctor fee of \$500. If the group cannot identify a test center that meets BPS specifications, BPS' testing consultant will provide a site for a fee of \$250. Payments must accompany the request for establishing an alternate site.

All requestors: Request forms and complete details on requesting an alternate test site are available from BPS and can also be accessed on the BPS web site (www.bpsweb.org). Requests for alternate sites must be submitted, in writing, to BPS by **July 1**, and must be accompanied by ALL applications and fees from those requesting the alternate site. All applicants requesting an alternate site will be advised of their eligibility to sit for the examination, as well as the designation of the alternate site, by August 1. BPS will not be responsible for notifying other candidates or the profession-at-large of these designated alternate sites.

Examination dates for BPS specialty certification examinations are set by the Board and remain the same regardless of site.

Transferring Test Sites

Candidates wishing to transfer test sites must do so **IN WRITING** and the request must be received by BPS by **September 1** for the October test date. Requests should be sent to: BPS, 2215 Constitution Avenue, Washington, DC 20037; Fax: 202-429-6304; E-mail: bps@aphanet.org

Exception to Eligibility Requirements

Candidates for certification, who are within six (6) months of fulfilling the eligibility requirement for time in practice or completion of a residency, will be permitted to sit for the certification examination. If a passing score is achieved, certification will be granted following receipt of documentation that the individual has fulfilled this eligibility requirement.

Processing Applications

All applicants will be notified by mail of their eligibility to sit for the examination within 20 working days of BPS' receipt of their application and fee. If for any reason an application is rejected, the entire fee is refunded and the application and all documentation are returned to the applicant along with a letter explaining why the application was not accepted. Incomplete applications may be returned to candidates by mail without being processed. Applicants who submit applications electronically will be notified if their application is incomplete or rejected.

For identification purposes, a unique Candidate Number is assigned to each eligible applicant by BPS when an application is processed. Candidates should keep a record of this number and use it in all correspondence with BPS.

An Admission Permit will be mailed to each candidate at least two weeks prior to the examination date. This permit notes the candidate's name and address as they appear in the official BPS files, Candidate Number, testing site and room name, and starting time for the examination. This admission permit, along with valid picture identification with a signature, **MUST** be presented at the examination site to gain admission to the testing room. If an applicant has not received this permit at least 5 days before the examination, BPS should be notified immediately by phone (202-429-7591) or email: bps@apbanet.org

Withdrawals

Candidates may withdraw from the certification process up to the withdrawal deadline of **September 1**. Candidates must inform the Board of their withdrawal by letter. This letter may be sent by fax, regular mail, or e-mail. The letter must be received by the Board on or before the deadline of **September 1**.

Requests for medical and personal emergency withdrawals after the deadline are reviewed by the BPS Executive Director and decisions are made on a case-by-case basis. The request, with supporting documentation (e.g., physician's letter, police report), must be in writing and must be received at the BPS office no later than **SEVEN** days after the examination date.

Candidates who withdraw from the certification process will be refunded the fee paid, less an administrative charge of \$100. Refunds will be processed within three to five weeks after the examination date.

Retaking the Examination

If a candidate fails to achieve a passing score on the examination, retaking the examination is permitted. BPS automatically mails a modified application form to all those who have failed an examination in the previous year. The fee for retaking the examination is \$300. If the candidate does not retake the examination within a two-year period, submission of the complete application will be required, along with payment of the full fee in effect at that time. **An individual who fails one specialty examination may NOT apply for another specialty examination as a retake candidate.**

Retake candidates may withdraw from the certification process up to the stated withdrawal deadline (**September**

1). Candidates who withdraw from the retake process will be refunded the fee paid, less an administrative charge of \$100. If the candidate does not retake the examination within a two-year period, submission of the complete application will be required, along with payment of the full fee in effect at that time.

Americans with Disabilities Act

The Board of Pharmaceutical Specialties complies with the relevant provisions of the American with Disabilities Act (ADA). Individuals with a disability who require accommodations under this Act during the certification examination must complete and submit the "Accommodation Request Form," along with the application form. All application forms and requests for accommodations must be postmarked no later than **August 1**.

It is the individual's responsibility to complete all applicable parts of this form if an accommodation is being requested. Supporting documentation must be supplied regardless of the method of submitting the application (electronic, fax, mail). Professionals submitting documentation in support of a candidate's request for accommodation may be contacted by BPS for clarification of any information provided concerning the requested accommodations. Failure to notify the Board of needed accommodations by August 1 may result in the accommodations not being available at the time of the examination.

FEES AND PAYMENT METHODS

Fee Payments

Payments are made in US dollars by **check, cashier's check, or money order** made payable to Board of Pharmaceutical Specialties, or by **credit card** (VISA, MasterCard, American Express). Purchase orders can **NOT** be accepted.

Application Fee

The application fee payment must accompany each completed application. The fee for first-time applicants* for specialty certification is six hundred dollars (\$600).

* Candidates who have failed an examination within the past two years will receive a special application directly from BPS early in the year. They may retake the failed examination during this period at a cost of \$300.

Declined Credit Cards, Returned Checks, and Handling Fees

When a credit card transaction is declined, or a check is returned for non-sufficient funds, BPS charges a \$25 handling fee. When resubmitting payment, send a certified check or money order for the amount due, which should include the \$25 additional handling fee.

Forfeiture of Fees

Candidates failing to arrive at the Testing Centers on the date and time that they are scheduled for examination will forfeit their examination fees and must re-register by contacting BPS. Examination fees may NOT be transferred to another date.

Candidates arriving more than 15 minutes late for an examination will not be admitted, and will forfeit their

examination fee.

All fees are subject to change at the sole discretion of the Board.

INFORMATION FOR FOREIGN TRAINED/ FOREIGN LICENSED CANDIDATES

BPS certification is oriented primarily toward pharmacists licensed and practicing in the USA. Applicants who received their pharmacy education and training outside the USA but who are licensed to practice in the USA need only provide a photocopy of their current, active state pharmacy registration certificate/license (license number if applying online), along with their application form.

Applicants who received their pharmacy education outside the USA and who are not licensed to practice pharmacy in the USA must provide the Board with the following:

- copy of certificate, diploma or other official document indicating that the individual has completed an educational program preparing him/her for basic pharmacy practice; and
- documentation of current active legal authorization to practice pharmacy in their country of origin or residence.

Note eligibility restrictions for the nuclear pharmacy specialty on page 11

If these documents are not in English, notarized English translations must be provided by the candidate, at the candidate's expense.

Throughout BPS specialty certification examinations, all measurements from laboratory test results are expressed in traditional units. For those candidates whose pharmacy practice site is outside the United States, a conversion chart from traditional units to standard international units will be provided.

The Board is aware that examination questions dealing with regulatory issues in the USA are not necessarily pertinent to candidates who practice in foreign countries. However, all candidates are given the same examination and are held to the same standard of achievement, regardless of the country in which they practice and the regulations under which they practice.

Please note BPS certification does not confer the privilege to practice pharmacy in the USA or in any other country.

PREPARING FOR THE EXAMINATION

The Board publishes the content outline specific to each examination and strongly encourages candidates to become thoroughly familiar with this document. Content outlines are occasionally modified to reflect changes in practice. Candidates should ensure that they are using the current outline for their

specialty. Current content outlines are posted on the BPS web site or are available upon request from BPS.

Suggested preparation for the examination might include:

- the study of journal articles, textbooks or other publications related to the content outline;
- continuing education programs and courses in specialized pharmacy practice;
- study groups and examination preparation courses;
- reviewing sample test questions printed in this Guide or on the BPS website.

Potential applicants may contact the organizations noted below which offer review/preparatory courses and materials for the specialty or specialties listed to determine program content, relevance to the BPS examinations and availability. BPS and its Specialty Councils neither sponsor nor endorse training or educational opportunities in specialized practice areas, or review/preparatory courses for any of the BPS examinations.

Contact the organization for more information. This is not intended to be a comprehensive list of sources.

For Oncology Pharmacy and Pharmacotherapy:

American College of Clinical Pharmacy
(913) 492-3311 • FAX (913) 492-0088
www.accp.com

For Nuclear Pharmacy:

American Pharmacists Association
(800) 237-2742 • FAX (202) 783-2351
www.aphanet.org

University of New Mexico College of Pharmacy
Office of Continuing Pharmacy Education
(505) 272-3125 • FAX (505) 272-6749
hsc.unm.edu/pbarmacy/radiopharmacyCE

For Nutrition Support Pharmacy:

American Society for Parenteral and Enteral Nutrition
(301) 587-6315 • FAX (301) 587-2365
www.clinnutr.org

For Oncology Pharmacy and Psychiatric Pharmacy:

American Society of Health-System Pharmacists
(301) 657-4383 • FAX (301) 652-8278
www.asbp.org

For Oncology Pharmacy

Hematology Oncology Pharmacy Association
(877) 467-2791
www.boparx.org

For Psychiatric Pharmacy:

College of Psychiatric and Neurologic Pharmacists
(402) 476-1677
www.cpnnp.org

ON THE DAY OF YOUR EXAMINATION

Inclement Weather and Cancellations

The safety of all candidates is of the utmost concern to BPS. Reasons for canceling an examination administration may include, but not be limited to, adverse weather conditions and natural disasters. BPS will consult with its testing agency and on-site Chief Examiners to determine the status of affected test sites. If the examination administration is canceled, BPS will work with its testing agency and the on-site Chief Examiner to place notices with local news services indicating the examination's cancellation. Notice will also be posted on the BPS web site (www.bpsweb.org). No alternate date will be scheduled.

Candidates are urged to contact the Board (202-429-7591 or bps@aphanet.org) or visit the BPS web site (www.bpsweb.org) on the day prior to the examination, if weather conditions are such that the cancellation of other civic activities and/or the closing of airports appear to be imminent.

If an examination administration is canceled for weather-related and/or safety concerns, candidates will be offered a refund of their full fee paid. BPS, however, is not responsible for any personal costs or expenses incurred by candidates in the event that an examination administration is canceled.

Examination Format and Content

There are 200 questions on each BPS specialty certification examination. The multiple-choice format is used exclusively. Four possible answers are provided for each question, with only ONE designated as the correct or best choice. It is to the candidate's advantage to answer every question on the examination, since the final score is based on the total number of questions answered correctly. There is no penalty for selecting an incorrect choice. Each question is carefully written, referenced, and validated to determine its accuracy and applicability.

A specialty certification examination does not attempt to test all of a candidate's knowledge in the specialized practice area. The examination samples the knowledge and skills required to perform the tasks in each of the major areas of responsibility of the specialty as defined through a role delineation study. Mastery of the knowledge and skills involved in this defined scope of specialized practice is necessary for board certification, regardless of the particular activities in which an applicant is currently involved.

BPS specialty certification examinations are constructed according to test specifications derived from task analyses. Technical support in conducting task analyses, establishing test specifications and constructing examinations is provided by an independent testing company that specializes in the assessment of the knowledge, skills and abilities of professionals.

A Content Outline, listing the domains, tasks, and knowledge statements specific to each specialty practice, is provided for the information of prospective candidates on the BPS website or

upon request. The Content Outline also notes the percentage of items per domain. Examination content outlines are developed through a nationwide study of the work pharmacy specialists perform in a variety of practice settings.

Examinations are not structured domain by domain. Items testing each domain are distributed randomly throughout the total examination. While BPS examinations test the stated domains of each specialty, candidates are advised that the examinations will probably NOT address all of the knowledge statements listed under the domains in the content outline of the examination.

New regulations, drugs and therapies are incorporated annually into the examinations. All BPS specialty certification examinations reflect current, best practice at the time they are constructed – approximately six months prior to test administration. Official United States Adopted Name (USAN) generic names are used on all BPS examinations for all drug products, when possible.

Administration of the Examination

The examination day schedule is provided below. Candidates may complete and return the examination materials to proctors before the scheduled end of either test session.

Activity	Time
Admit Candidates to Room	8:00 am
Test Instructions	8:30 am
First Session (100 items)	9:00 am
Lunch Break	11:30 am
Admit Candidates to Room	12:45 pm
Test Instructions	1:15 pm
Second Session (100 items)	1:30 pm
End of Examination	4:00 pm

On the day of the examination, all candidates MUST present their Admission Permits AND valid photo identifications with signature (e.g., driver's license, hospital identification, passport) in order to be admitted to the testing room. Candidates who arrive after the examination has begun and candidates without valid photo identification and an admission permit may not be admitted to the examination. If that occurs, their fees will be forfeited.

Candidates will not be permitted to enter the exam room unless proper identification as described above is presented.

Candidates must provide their own sharpened #2 (or 2B) pencils, good eraser and hand-held, silent, non-printing, battery or solar powered calculator for use during the examination. Candidates will **NOT** be permitted to have reference books, study notes, or certain personal items in the examination room, including:

- Cell phones
- Cameras
- PDA's (personal digital assistants)
- Pagers
- Radio or headset devices

Recorders
Purses
Briefcases
Food or drink
Hats (other than ceremonial or religious headwear)
Jackets
Personal papers
All non-test materials listed above must be stored in areas designated for that purpose.

Test instructions will be provided to candidates on the use of the answer sheet. Only answers properly marked on the answer sheet will be scored. Answers written in the test book will not be scored. The test booklet and the answer sheet are the property of BPS. **BOTH must be returned to the proctors at the end of EACH session of the examination.**

Security

PES and BPS maintain examination administration and security standards that are designed to assure that all candidates are provided the same opportunity to demonstrate their abilities. The testing sites are monitored by proctors for security purposes. Candidates will be allowed to leave the room during the test administration to use the restroom facilities. Only one person will be excused from the room at a time and a proctor will accompany the individual to and from the restroom. Candidates are encouraged to place their answer sheet inside the examination booklet whenever they leave their seats.

Before beginning the examination, candidates will be asked to read and sign the *Statement of Confidentiality*. This statement restricts candidates from sharing any information about the examination with other individuals, including discussions with fellow test takers following the examination, and the sharing of information with colleagues who might be planning to take the examination in the near future.

Chief Examiners are authorized by BPS and its testing consultant to maintain a secure and proper test administration environment. This may include the relocation of candidates prior to or during the examination and/or the dismissal of candidates from the examination. Candidates will be inspected for devices such as hand-held scanners, cameras, tape recorders, or other electronic equipment. Areas around the testing room (e.g. hallways, restrooms, telephone stalls) are monitored throughout the examination for security purposes.

Candidates may not communicate with other candidates during the examination. Anyone who provides or receives assistance during the test administration will be dismissed from the testing room. Candidates may not photograph, record, or memorize any examination material. Other causes for dismissal include, but are not limited to: using notes; references, or any test aids; using unauthorized calculators causing a disruption to the test environment; and removing any examination material from the testing site. Candidates who are dismissed from the testing room forfeit all fees.

Candidates' calculators and wristwatches will be checked prior to admission to the testing room for word processing capabilities. If either is found to be a word processor, it will be

confiscated by a proctor and returned at the end of the test day.

Personnel from the Board of Pharmaceutical Specialties, its Specialty Councils, BPS Testing Consultants, and/or their delegates will proctor the examination. No one is permitted in the testing room during the examination except for the candidates and persons authorized by BPS and/or by the testing consultant.

Statement of Confidentiality for BPS Examinations:

1. This examination and the test questions contained herein are the exclusive property of BPS.
2. This examination and the test questions contained herein are protected by copyright law. No part of this exam may be copied or reproduced in part or whole by any means whatsoever, including memorization.
3. The theft or attempted theft of an examination booklet is punishable as a felony.
4. My participation in any irregularity occurring during this examination, such as giving or obtaining unauthorized information or aid, as evidenced by observation or subsequent analysis, may result in termination of my participation, invalidation of the results of my examination or other appropriate action.
5. Further discussion or disclosure of the contents of the examination orally, in writing or by any other means is prohibited

My signature indicates that I have read, understood and agree to be bound by the statement of confidentiality. Failure to comply can result in termination of my participation, invalidation of the results of my examination or other appropriate action.

Use of Calculators

In order to provide a realistic environment for performing calculations in the solution of practice problems, hand-held, silent, non-printing, battery or solar powered calculators may be used. Hand-held calculators that contain addition, subtraction, multiplication, division, and log functions are appropriate for the examination. Candidates may NOT use calculators or any other devices that have either word processing or word storage capabilities (complete A-Z keypad). All calculators will be examined by a proctor before a candidate is admitted to the examination area. Candidates are responsible for providing their own calculators.

FOLLOWING THE EXAMINATION

Score Reporting

Specialty certification examinations are prepared by BPS Specialty Councils to assess practice-based knowledge and skills. Candidates' scores are determined by the total number of items answered correctly. Criterion-referenced, standard-setting procedures are used to establish the passing score for all BPS

examinations. A detailed description of this process is posted at the BPS web site (www.bpsweb.org).

Answer sheets are scored electronically. Candidates who do not achieve a passing score on the examination may request a hand scoring of their answer sheets. Requests for hand scoring of the answer sheets must be submitted to BPS in writing within 90 days of the candidate's receipt of his/her score report. A check or money order for fifty dollars (\$50) must accompany the request for hand scoring.

Confidential Score Reports

Confidential score reports are sent directly to each candidate by first-class mail. Each score report contains the following information: passing score, candidate's score, maximum score, average score, standard deviation and range of scores. Total scores are reported, as well as scores by domains.

The standard turn-around time required to score, analyze, report scores and grant certification is approximately sixty days. A certificate suitable for framing and a BPS lapel pin are sent to newly certified specialists approximately sixty days after notification of certification.

Application to take the certification examination constitutes written authorization for the testing agency to release that candidate's score to BPS and to the examinee ONLY. Group performance data will be utilized by the testing agency, the Specialty Council, or others designated by BPS, for purposes of research and development and for reporting to the profession. Access to a candidate's score report is limited to those staff at BPS and the Board's testing consultant who are involved in the processing and mailing of these reports. BPS will not release personal exam information (other than name/address of certified individuals under established policy) without written authorization.

In order to protect the security and integrity of the specialty certification examinations, neither BPS nor its testing agency release examination questions, answer sheets, or the answer key to any individual or agency. While all efforts are made by BPS, its Specialty Councils, and its testing agency to produce completely accurate examinations, occasional errors do occur. If a candidate believes there is an error in an examination question, the on-site proctor should be advised at once or the candidate should contact BPS immediately after the examination.

If You Pass the Examination

Once scores have been validated, BPS sends official notices to candidates who have achieved passing scores on the examinations. PES or BPS will NOT report individual scores by telephone, fax, or email. Candidates who do not receive score reports within 75 days after the test date should contact BPS in writing and a duplicate report will be issued at no cost.

If You Do Not Pass the Examination

If you do not achieve a passing score on the examination, you may contact BPS to re-apply to take the examination. The fee for retaking the examination is \$300. If the candidate does not retake the examination within a two-year period, submission of the complete application will be required, along with payment

of the full fee in effect at that time. **An individual who fails one specialty examination may NOT apply for another specialty examination as a retake candidate**

REVOCATION OF CERTIFICATION

Basis for revocation: The certification of an individual may be revoked by BPS for any of the following reasons:

- Failure to complete or fulfill the requirements for certification or recertification;
- Failure to maintain professional licensure;
- Determination that certification or recertification was improperly granted;
- Misrepresentation or misstatement of facts submitted upon application for certification or recertification;
- Violation of Conflict of Interest and/or confidentiality/ non-disclosure attestations to BPS

Appeal Process

A reconsideration and appeal process is available to individuals seeking a redress of an action by BPS. All requests must be made in writing. The process and procedures for appeal are available at www.bpsweb.org, or upon request from the BPS office.

RECERTIFICATION

To maintain "Active" BPS status, recertification is required every 7 years. Recertification requirements are listed in the BPS Specialties section (pages 11 to 14). Certificants are expected to keep their certification current. If requirements are not completed at the end of the seven year cycle, certification lapses, unless an extension is requested and granted by BPS. Once certification has lapsed, certificants will need to meet the requirements to take and pass the certification exam.

ANNUAL REGISTRATION

All BPS-certified pharmacists are required to register annually with the Board and pay an annual fee, currently \$100. An invoice for the annual fee is mailed in the spring. Pharmacists holding more than one BPS certification are assessed only one annual fee.

Failure to pay the annual fee results in removal of the individual's name from BPS' official list of certified pharmacists for that year. This list of BPS-certified specialists "in good standing" is published on the Board's web site and elsewhere. Upon applying for recertification, all outstanding annual fees and a 5% penalty must be paid.

BPS SPECIALTIES

NUCLEAR PHARMACY

Nuclear Pharmacy seeks to improve and promote the public health through the safe and effective use of radioactive drugs for diagnosis and therapy. A nuclear pharmacist, as a member of the nuclear medicine team, specializes in the procurement, compounding, quality control testing, dispensing, distribution, and monitoring of radiopharmaceuticals. In addition, the nuclear pharmacist provides consultation regarding health and safety issues, as well as the use of non-radioactive drugs and patient

care. Those who are granted certification in this specialty may use the designation Board Certified Nuclear Pharmacist and the initials BCNP, as long as certification is valid.

Eligibility Requirements:

The minimum requirements for certification in nuclear pharmacy are:

- Graduation from a pharmacy program accredited by the Accreditation Council for Pharmacy Education (ACPE) or program outside the U.S. that qualifies the individual to practice in the jurisdiction. Foreign trained pharmacists must pass the Foreign Pharmacy Graduate Examination Committee (FPGEC) examination.
- Current, active license to practice pharmacy in the U.S. or another jurisdiction
- 4,000 hours of training/experience in nuclear pharmacy practice
- Achieving a passing score on the Nuclear Pharmacy Specialty Certification Examination

The required 4,000 hours of experience may be earned in a variety of settings.

Academic-up to 2,000 hours:

- Undergraduate courses in nuclear pharmacy: up to 100 hours experience for every quarter credit hour or 150 hours experience for every semester credit hour, to a maximum of 1,500 hours
- Postgraduate courses in nuclear pharmacy: up to 100 hours experience for every quarter credit hour or 150 hours experience for every semester credit hour, to a maximum of 1,500 hours
- MS or PhD degree in nuclear pharmacy: 2,000 hours
- Successful completion of the Nuclear Pharmacy Certificate Program offered by Purdue University (217 hours) or The Ohio State University (214 hours), or the Nuclear Education Online (NEO) Program offered by the Universities of New Mexico and Arkansas (250 hours). Credit for other courses will be assessed on a case-by-case basis.

Training/Practice-up to 4,000 hours:

- Residency in nuclear pharmacy: hour-for-hour credit to a maximum of 2,000 hours
- Internship to satisfy requirements of state boards of pharmacy: hour-for-hour credit in a licensed nuclear pharmacy or facility authorized to handle radioactive materials, to a maximum of 2,000 hours
- Nuclear pharmacy practice: hour-for-hour credit in a licensed nuclear pharmacy or health care facility approved by state or federal agencies to handle radioactive materials, to a maximum of 4,000 hours.

Examination Content (Refer to the Nuclear Pharmacy Content Outline for details.)

Domain 1: Drug Order Provision (66% of the examination)

- Subdomain A: Procurement (8% of the examination)
- Subdomain B: Compounding (26% of the examination)
- Subdomain C: Quality Assurance (9% of the examination)
- Subdomain D: Dispensing (23% of the examination)

Domain 2: Health and Safety (24% of the examination)

Domain 3: Drug Information Provision (10% of the examination)

Recertification

Recertification for Board Certified Nuclear Pharmacists (BCNP) is a three-step process:

- Self-evaluation: Review of the nuclear pharmacy practice activities/functions that have changed since initial certification or last recertification
- Peer review: Documentation of nuclear pharmacy practice activities over the seven year certification period, which are then reviewed by the Specialty Council on Nuclear Pharmacy
- Formal Assessment: This assessment of a practitioner's knowledge and skills will be accomplished through one of two methods: 1) achieving a passing score on the 100-item, multiple-choice objective recertification examination, based on the content outline of the certification examination; OR 2) earning 70 hours of continuing education credit provided by a professional development program approved by BPS.

A current, active license to practice pharmacy is required for recertification.

As part of the recertification process, every BCNP is asked to complete an annual practice report form provided by BPS. The information is compiled by BPS at the beginning of the recertification process and sent to the BCNP for verification and updating. At the time of recertification, the BCNP is also required to certify that (s)he is not currently under suspension by either the U.S. Nuclear Regulatory Commission or a state Radiation Control Organization.

NUTRITION SUPPORT PHARMACY

Nutrition support pharmacy addresses the care of patients who receive specialized nutrition support, including parenteral and enteral nutrition. The nutrition support pharmacist has responsibility for promoting maintenance and/or restoration of optimal nutritional status, designing and modifying treatment according to the needs of the patient. The nutrition support pharmacist has responsibility for direct patient care and often functions as a member of a multidisciplinary nutrition support team. Those who are granted certification in this specialty may use the designation Board Certified Nutrition Support Pharmacist and the initials BCNSP, as long as certification is valid.

Eligibility Requirements

The minimum requirements for this specialty certification are:

- Graduation from a pharmacy program accredited by the Accreditation Council for Pharmacy Education (ACPE) or program outside the U.S. that qualifies the individual to practice in the jurisdiction.
- Current, active license to practice pharmacy in the U.S. or another jurisdiction.
- Completion of three (3) years practice experience with at least 50% of time spent in nutrition support pharmacy activities (as defined by the BPS Nutrition Support Content

Outline)
OR

Completion of a (PGY2) residency* in nutrition support pharmacy.

- Achieving a passing score on the Nutrition Support Pharmacy Specialty Certification Examination.

**Effective January 1, 2013, only residencies accredited by the American Health-System Pharmacists or other recognized bodies are creditable for this purpose.*

Examination Content (refer to the Nutrition Support Pharmacy Content Outline for details)

Domain 1: Clinical Practice/Provision of Individualized Nutrition Support to Patients (68% of the examination)

- Subdomain A: Assessment (21% of the examination)
- Subdomain B: Develop and Implement a Therapeutic Plan of Care (21% of the examination)
- Subdomain C: Monitoring and Clinical Management (26% of the examination)

Domain 2: Management of Nutrition Support Operations (20% of the examination)

- Subdomain A: Patient Care Management (12% of the examination)
- Subdomain B: Compounding Operations (8% of the examination)

Domain 3: Advancement of Nutrition Support Practice (12% of the examination)

Recertification

Recertification for Board Certified Nutrition Support Pharmacists (BCNSP) is based on the following activities:

- Earning a minimum of 3.0 continuing education units (CEU) in nutrition support with no less than 1.0 CEU earned every two years. These CEU must be from providers approved by the Accreditation Council for Pharmacy Education (ACPE). NOTE: 1.0 CEU equals 10 hours of approved continuing education.
- Achieving a passing score on the 100-item, multiple-choice recertification examination, which is based on the content outline of the certification examination

A current, active license to practice pharmacy is required for recertification.

ONCOLOGY PHARMACY

Oncology pharmacy specialists recommend, design, implement, monitor and modify pharmacotherapeutic plans to optimize outcomes in patients with malignant diseases. Those who are granted certification in this specialty may use the designation Board Certified Oncology Pharmacist and the initials BCOP, as long as certification is valid.

Eligibility Requirements

The minimum requirements for this specialty certification are:

- Graduation from a pharmacy program accredited by the Accreditation Council for Pharmacy Education (ACPE) or a program outside the U.S. that qualifies the individual to practice in the jurisdiction.

- Current, active license to practice pharmacy in the U.S. or another jurisdiction.
- Completion of four (4) years of practice experience with at least 50% of time spent in oncology pharmacy activities (as defined by the BPS oncology pharmacy content outline) OR
- Completion of a specialty (PGY2) residency* in oncology pharmacy plus one (1) additional year of practice with at least 50% of time spent in oncology pharmacy activities (as defined by the BPS oncology pharmacy content outline)
- Achieving a passing score on the Oncology Pharmacy Specialty Certification Examination

**Effective January 1, 2013, only residencies accredited by the American Society of Health-System Pharmacists or other recognized bodies are creditable for this purpose.*

Examination Content (Refer to the Oncology Pharmacy Content Outline for details)

Domain 1: Clinical Skills and Therapeutic Management. (60% of the examination)

Domain 2: Generation, Interpretation, and Dissemination of Information. (20% of the examination)

Domain 3: Guidelines, Policies, and Standards. (15% of the examination)

Domain 4: Public Health and Advocacy. (5% of the examination)

Recertification

Recertification for Board Certified Oncology Pharmacists (BCOP) requires assessment of a practitioner's knowledge and skills through one of two methods:

- Achieving a passing score on the 100-item, multiple-choice objective recertification examination, based on the content outline of the certification examination; OR
- Earning 100 hours of continuing education credit provided by a professional development program approved by BPS.

A current, active license to practice pharmacy is required for recertification.

PHARMACOTHERAPY

Pharmacotherapy is that area of pharmacy practice that is responsible for ensuring the safe, appropriate, and economical use of drugs in patient care. The pharmacotherapy specialist has responsibility for direct patient care, often functions as a member of a multidisciplinary team and is frequently the primary source of drug information for other healthcare professionals. Those who are granted certification in this specialty may use the designation Board Certified Pharmacotherapy Specialist and the initials BCPS, as long as certification is valid.

Eligibility Requirements

The minimum requirements for this specialty certification are:

- Graduation from a pharmacy program accredited by the Accreditation Council for Pharmacy Education (ACPE) or a program outside the U.S. that qualifies the individual to practice in the jurisdiction.
- Current, active license to practice pharmacy in the U.S. or

another jurisdiction.

- Completion of three (3) years of practice experience with at least 50% of time spent in pharmacotherapy activities (as defined by the BPS Pharmacotherapy Content Outline)
- OR
- Completion of a PGY1 residency*.
- Achieving a passing score on the Pharmacotherapy Specialty Certification Examination

**Effective January 1, 2013, only residencies accredited by the American Society of Health-System Pharmacists or other recognized bodies are creditable for this purpose.*

Examination Content (Refer to the Pharmacotherapy Content Outline for details.)

Domain 1: Patient-specific Pharmacotherapy

(55% of the examination)

Domain 2: Retrieval, generation, interpretation and dissemination of knowledge in pharmacotherapy

(30% of the examination)

Domain 3: Health System-related Pharmacotherapy

(15% of the examination)

Recertification

Recertification for Board Certified Pharmacotherapy Specialists (BCPS) is an assessment of a practitioner's knowledge and skills through one of two methods:

- Achieving a passing score on the 100-item, multiple-choice objective recertification examination, based on the content outline of the certification examination;
- OR
- Earning 120 hours of continuing education credit provided by a professional development program approved by BPS.

A current, active license to practice pharmacy is required for recertification.

PSYCHIATRIC PHARMACY

Psychiatric pharmacy addresses the pharmaceutical care of patients with psychiatric-related illnesses. As a member of a multidisciplinary treatment team, the psychiatric pharmacy specialist is often responsible for optimizing drug treatment and patient care by conducting such activities as monitoring patient response, patient assessment, recognizing drug-induced problems, and recommending appropriate treatment plans. Those who are granted certification in this specialty may use the designation Board Certified Psychiatric Pharmacist and the initials BCPP, as long as certification is valid.

Eligibility Requirements

The minimum requirements for this specialty certification are:

- Graduation from a pharmacy program accredited by the Accreditation Council for Pharmacy Education (ACPE) or a program outside the U.S. that qualifies the individual to practice in the jurisdiction.
- Current, active license to practice pharmacy in the U.S. or another jurisdiction.
- Completion of four (4) years of practice with at least 50% of time spent in psychiatric pharmacy activities (as defined by the BPS Psychiatric Pharmacy Content Outline)

OR

- Completion of a specialty (PGY2) residency* in psychiatric pharmacy plus one (1) additional year of practice with at least 50% of time spent in psychiatric pharmacy activities (as defined by the BPS Psychiatric Pharmacy Content Outline)
- Achieving a passing score on the Psychiatric Pharmacy Specialty Certification Examination

**Effective January 1, 2013, only residencies accredited by the American Society of Health-System Pharmacists or other recognized bodies are creditable for this purpose.*

Examination Content (Refer to the Psychiatric Pharmacy Content Outline for details.)

Domain 1: Clinical Skills and Therapeutic Management

(65% of the examination)

Domain 2: Education and Dissemination of Information

(25% of the examination)

Domain 3: Clinical Administration (10% of the examination)

Recertification

Recertification of Board Certified Psychiatric Pharmacists (BCPP) requires an assessment of a practitioner's knowledge and skills through one of two methods:

- Achieving a passing score on the 100-item multiple choice recertification examination, based on the content outline of the certification examination;
- OR
- Earning 100 hours of continuing education credit provided by a professional development program approved by BPS.

A current, active license to practice pharmacy is required for recertification.

SAMPLE EXAMINATION QUESTIONS

The following sample questions provide candidates with an opportunity to review the FORMAT of questions used on BPS specialty certification examinations. Four possible answers are provided for each question, with only ONE designated as the correct or best choice. This multiple-choice format is used exclusively on BPS examinations.

Practice tests for each specialty are also available on the BPS website at www.bpsweb.org. Consult them for more specialty-specific examples of questions.

SAMPLE:

A 35-year-old, 70 kg patient was examined by his family physician for a complaint of right-sided abdominal pain for 6 weeks, and nausea. A CT scan of the abdomen revealed a solid bulky mass within the retroperitoneum. The patient underwent an exploratory laparotomy and the mass (8.0 x 7.0 cm) was removed. The patient was diagnosed with advanced testicular cancer and underwent a right orchiectomy. He has now been admitted for his first cycle of cisplatin, vinblastine, and bleomycin (PVB). In addition to corticosteroids, which of

the following is the best choice for an antiemetic to provide for prevention of acute emesis?

- *1. Ondansetron
- 2. Metoclopramide
- 3. Prochlorperazine
- 4. Haloperidol

SAMPLE:

The GUSTO-1 trial evaluated four thrombolytic strategies for acute myocardial infarction. The investigators studied 41,021 patients with evolving myocardial infarction. A total of 1,081 hospitals in 15 countries participated in the trial, which was conducted from December 1990 to February 1993. The authors found a 14% reduction in the mortality for accelerated tissue plasminogen activator (t-PA) as compared with two streptokinase-only strategies (p=.001). The mortality rates for the four treatment groups are reported below:

Regimen #	Thrombolytic Strategy	30-day mortality rates
1	Streptokinase and i.v. heparin	7.4%
2	Accelerated t-PA and i.v. heparin	6.3%
3	Streptokinase and s.c. heparin	7.2%
4	t-PA and streptokinase and i.v. heparin	7.0%

Considering these results, for every 100 patients treated, how many more patients would benefit (i.e., demonstrate reduced 30-day mortality) after receiving accelerated t-PA (Regimen #2) rather than streptokinase and i.v. heparin (Regimen #1)?

- (1) 0.1
- (*2.) 1
- (3.) 7
- (4.) 11

SAMPLE:

For a state of equilibrium to occur in a radionuclide generator:

- *1. The half-life of the parent radionuclide must be longer than the half-life of the daughter radionuclide.
- 2. The daughter radionuclide must be a stable isotope.
- 3. Elution must occur daily.
- 4. The daughter radionuclide should exhibit branched decay.

SAMPLE:

An 70-year-old ambulatory patient with hypertension receiving Lisinopril 20mg daily requires a second antihypertensive agent for optimum blood pressure control. History includes diet-controlled diabetes mellitus, type 2 chronic obstructive pulmonary disease, mild left ventricular hypertrophy (LVH) and mild dementia. Serum creatinine = 2.5 mg/dL; BUN = 30 mg/dL. Which of the following antihypertensive agents should be added to the regimen?

- 1. Prazosin
- 2. Verapamil
- *3. Metoprolol
- 4. Hydrochlorothiazide

SAMPLE:

A patient with diabetes mellitus Type 2 reports vomiting, somnolence, epigastric pain, anorexia, hyperventilation, diarrhea, and thirst. Medications include enalapril 20 mg q.d.; hydrochlorothiazide 25 mg q.d.; metformin 2000 mg q.d.; and digoxin 0.25 mg q.d. Serum creatinine = 2.0 mg/dL, blood glucose = 365 mg/dL, pH = 7.2, anion gap = 20. Which adverse drug effect is the patient most likely experiencing?

- 1. Renal tubular acidosis secondary to enalapril
- *2. Lactic acidosis secondary to metformin

- 3. Respiratory acidosis secondary to compensation for metabolic alkalosis from hydrochlorothiazide
- 4. Metabolic acidosis secondary to hydrochlorothiazide/digoxin

SAMPLE:

A 67-year-old patient with Parkinson's disease presents with mildly erythematous scaly plaques distributed in a butterfly-like pattern across the face and extending into the nasolabial folds. Scaling and flaking are also present in the patient's beard, eyebrows, scalp and behind his ears. Regimen is as follows: phenytoin, 300 mg h.s., for seizures following a stroke that occurred last year; amantadine, 100 mg b.i.d., for mild bradykinesia and rigidity; and augmentin, 250 mg t.i.d. x 10 days, for a recent upper-respiratory infection. The patient has no fever and claims that the lesions, which itch "a little bit," have been present for several years but have become more noticeable over the past month. Which of the following best describes how this problem should be managed?

- *1. Explain that the condition is seborrheic dermatitis, common in patients with Parkinson's disease and is not caused by drug therapy; treat with hydrocortisone cream 1% to affected areas b.i.d.
- 2. Call the patient's neurologist for evaluation and monitoring of the lesions for possible progression to Stevens-Johnson syndrome; discontinue phenytoin and substitute valproic acid.
- 3. Recommend that the patient stop using the augmentin, because of drug allergy, and call the patient's prescriber.
- 4. Explain that the condition is livedo reticularis, a harmless reaction to amantadine that requires no treatment.

SAMPLE:

A well-nourished 36 year-old male was transferred to the surgical ICU following an exploratory laparotomy for a gun shot wound to the abdomen. Transfer orders included continuous nasogastric suction, IM morphine for pain, cefoxitin, 2 gm IVPB q8 hr, and D5-Normal Saline, 85 ml/hr. On admission to the SICU, his serum electrolytes were normal. The patient remained NPO due to continued intestinal ileus, the nasogastric suction volume averaged 2000 ml daily, and the patient's weight was unchanged.

Laboratory values on the 3rd post-op day were:

Sodium	137 mEq/L	(normal = 135-147 mEq/L)
Potassium	3.8 mEq/L	(normal = 3.5-5.0 mEq/L)
Chloride	89 mEq/L	(normal = 95-105 mEq/L)
CO3	37 mEq/L	(normal = 22-28 mEq/L)
Glucose	111 mg/dL	(normal = 70-110 mg/dL)
BUN	22 mg/dL	(normal = 8-18 mg/dL)
Creatinine	1.2 mg/dL	(normal = 0.6-1.2 mg/dL)

Which of the following therapeutic recommendations is appropriate at this time?

- 1. initiate TPN due to prolonged period on NPO status
- *2. initiate parenteral ranitidine therapy to reduce gastric acidity
- 3. increase IV infusion rate to match nasogastric output volume
- 4. change IV infusion to D5-Lactated Ringers at same infusion rate

* Correct choice

VISION STATEMENT

The Board of Pharmaceutical Specialties will be the premier post-licensure certification agency serving the needs of the pharmacy profession and the public.

MISSION STATEMENT

The Mission of the Board of Pharmaceutical Specialties is to improve patient care through recognition and promotion of specialized training, knowledge, and skills in pharmacy and specialty board certification of pharmacists.

We will accomplish this mission by:

- *Providing leadership for the profession of pharmacy in the discussion, evolution, direction and recognition of specialty board certification of pharmacists;*
- *Establishing and promoting, in collaboration with stakeholders, the value of pharmacy specialization and board certification;*
- *Establishing the standards for identification and recognition of pharmacy specialties;*
- *Establishing standards of eligibility, knowledge and skills as the basis for board certification;*
- *Developing and administering a valid process to evaluate the knowledge and skills of pharmacists.*



Board of Pharmaceutical Specialties

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