

BOARD OF PHARMACY SPECIALITIES

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Content Outline for the PSYCHIATRIC PHARMACY SPECIALTY CERTIFICATION EXAMINATION May 2005

The following domains, tasks and knowledge statements were delineated by the BPS Specialty Council on Psychiatric Pharmacy. The proportion of examination items allotted to each domain was determined through analysis and discussion of the results of a role delineation update study which was conducted by the Board of Pharmaceutical Specialties as part of its ongoing review of Psychiatric Pharmacy as a specialty.

Each of the domains of Psychiatric Pharmacy noted below will be tested on the examination. Questions will not be grouped by domain. Rather, items testing each domain are distributed throughout the total examination. Please note this examination will **SAMPLE** a candidate's knowledge rather than trying to test all of his/her knowledge.

Domain 1: Clinical Skills and Therapeutic Management (65% of the examination)

Collaborate with other healthcare professionals in pursuing optimal medication therapy management for patients with psychiatric and neurologic disorders. This requires that the specialist collect and interpret pertinent clinical data, and assume responsibility for successful medication outcomes (such as through the recommendation, design, implementation, monitoring and/or modification of pharmacotherapeutic plans for the patient).

Tasks:

1. Conduct a mental status examination.
2. Interpret the results of a mental status examination.
3. Interpret the results of additional clinical data obtained by other healthcare professionals (e.g., physical examination, laboratory data, neurologic testing, psychological testing)
4. Conduct a clinical interview with patient, family, and/or caregiver(s) (e.g., medication history, adverse effects, adherence, target symptoms and severity) to identify information necessary to design a pharmacotherapeutic plan.
5. Identify target symptoms that respond to pharmacotherapy and variables that influence medication effectiveness (e.g., time to response, psychiatric and non-psychiatric co-morbidity, duration of illness).
6. Identify target symptoms that respond to non-pharmacologic interventions (e.g., cognitive-behavior therapy, electroconvulsive therapy, alternative therapies).
7. Establish measurable therapeutic goals in collaboration with the treatment team, patient, family, and/or caregiver(s)
8. Recommend/modify pharmacotherapy treatment plan.

9. Recommend/design/implement a medication-specific monitoring plan (e.g., follow up mental status assessment, adverse effect evaluation, physical assessment, use of rating instruments, lab tests, frequency and duration of follow-up).
10. Assess outcomes of the medication treatment and monitoring plans relative to therapeutic goals (e.g., effectiveness, drug-related problems, adherence) and revise, as required.
11. Anticipate and advise about potential drug-related problems.
12. Document and communicate findings and recommendations regarding pharmacotherapeutic treatment

Knowledge of:

- 01 Psychiatric and neurologic disorders:
 - Diagnostic criteria
 - Signs and symptoms
 - Pathophysiology
 - Etiology (including drug induced, disease induced)
 - Risk factors
 - Onset, course, and prognosis
 - Epidemiology
- 02 Pharmacologic treatment of psychiatric and neurologic disorders:
 - Relative role of treatment options (pharmacological and non-pharmacological)
 - Proposed mechanism of action and pharmacologic effects (including pharmacogenomics)
 - Relative potency, dosage, schedule, route of administration, and delivery technology
 - Relative efficacy and outcomes of treatment options, including natural products
 - Pharmacokinetics (including pharmacogenetics) and pharmacodynamics
 - Dosage initiation, titration, and discontinuation
 - Potential adverse events, toxicities, and management strategies
 - Relative and absolute contraindications
 - Pharmacoeconomics
 - Rationale for drug selection
 - Drug interactions
 - Special populations (e.g., gender, ethnicity, pregnancy, lactation, co-morbidity, age, partial and non-responders)
- 03 Disease/and medication-specific monitoring parameters for psychiatric and neurologic disorders:
 - Interviewing methods (e.g., mental status exam, psychiatric interview)
 - Laboratory and diagnostic tests (including imaging)
 - Therapeutic drug monitoring
 - Physical assessment (e.g., vital signs, movement disorders)
 - Therapeutic end points
 - Frequency and relative importance of monitoring parameters
 - Assessment measures (e.g., rating scales, inventories, quality of life)

Domain 2: Education and Dissemination of Information (25% of the examination)

Interpret, generate, and/or disseminate knowledge in psychiatric and neurologic pharmacy.

Tasks:

1. Evaluate the literature (e.g., pharmacotherapeutics, pharmacoeconomics, pharmacokinetics) with regard to study design and methodology, sources of bias, selection of rating scales, and significance of findings.
2. Integrate new information to establish recommendations for clinical use.
3. Provide medication education to patients, families, and caregivers in individual and group sessions.
4. Assess the effectiveness of medication education (including consideration of patient-specific parameters).
5. Provide formal and informal education to the treatment team, trainees, pharmacists, and other healthcare professionals.
6. Evaluate the quality and effectiveness (including cost-effectiveness) of medication-related services provided to patients with psychiatric and neurologic disorders.
7. Collaborate in the generation of new knowledge to foster the safe, effective, and economical use of pharmacologic agents.
8. Provide public information talks and/or write consumer-oriented literature regarding mental health issues, medication use, and substance abuse (e.g., professional presentations and publications)

Knowledge of:

- 01 Medical literature related to psychiatric and neurologic disorders
- 02 Design and methodology (including strengths and limitations of various designs and statistical methods)
- 03 Generalizability of research findings
- 04 Clinical versus statistical significance
- 05 Medication educational methods
- 06 Procedures to assess medication education
- 07 Regulatory guidelines and information resources for medication education
- 08 Regulatory and ethical issues related to research in patients with psychiatric and neurologic disorders (including competency, confidentiality, informed consent and patient rights)

Domain 3: Clinical Administration (10% of the examination) In collaboration with other healthcare professionals and administrators, advocate, recommend, design, implement, monitor, and modify systems and policies to optimize medication therapy in the treatment of patients with psychiatric and neurologic disorders.

Tasks:

1. Evaluate psychiatric services for compliance with standards established by national accrediting and regulatory agencies as related to practice in healthcare settings (e.g., mental health, mental retardation, substance abuse, forensic settings).
2. Act as an advocate for patients' rights, including competency, confidentiality, and informed consent.

3. Assess prescribing patterns for patients with psychiatric and neurologic disorders.
4. Develop and implement medication use policies in collaboration with other healthcare providers and/or agencies to optimize patient outcomes.
5. Develop and/or implement strategies for providing pharmacy services appropriate to the needs of patients with psychiatric and neurologic disorders.

Knowledge of:

- 01 Clinical practice guidelines for treatment of patients with psychiatric and neurologic disorders
- 02 National accreditation and regulatory standards (e.g., JCAHO, HIPAA, CMS, CARF, Belmont Report, OHRP, OBRA, DEA, ASHP Psychopharmacy Practice Residency Standards)
- 03 Reimbursement policies of federal, state, and private agencies as related to the provision of psychiatric healthcare
- 04 Performance improvement methods (e.g., peer review, adverse event monitoring, medication use evaluation)
- 05 Position statements of the American Psychiatric Association, American College of Neuropsychopharmacology, National Alliance for the Mentally Ill, and other similar groups.

CATEGORIES OF DISORDERS
(Accompanies BPS Psychiatric Pharmacy Content Outline 2005)

Psychiatric Disorders

- Attention-Deficit/Hyperactivity Disorder (ADHD)
- Bipolar disorders
- Delirium, dementia, and amnesic and other cognitive disorders
- Depressive disorders
- Developmental disorders
- Eating disorders
- Generalized anxiety disorder
- Impulse control/aggression
- Mental disorders due to a general medical condition (e.g., HIV-psychosis, hyperthyroidism, depression secondary to chronic medical conditions)
- Obsessive Compulsive Disorder (OCD) and OC spectrum disorders
- Other psychiatric disorders (e.g., somatoform, dissociative, factitious, sexual/gender identity, adjustment disorders)
- Panic disorder
- Personality disorders
- Phobic disorders
- Post-Traumatic Stress Disorder (PTSD) and other trauma- related disorders
- Schizophrenia and other psychotic disorders
- Sleep disorders (e.g., insomnia, narcolepsy, sleep apnea)
- Substance-related disorders
- Suicidal ideation

Neurologic Disorders

- Movement disorders (e.g., Tourette's, Huntington's, Parkinson's, drug-induced EPS)
- Headache/migraine
- Pain
- Seizure disorders/head injury/stroke

Miscellaneous

- Adverse psychotropic drug interactions/reactions (including, e.g., obesity/diabetes/lipid disorders associated with atypical antipsychotics)
- Pregnancy, post-partum, and lactation (including medication use and psychiatric disorders occurring in these stages)
- Special populations: developmentally disabled (including medication use and other psychiatric disorders not included above)
- Special populations: elderly (including medication use and other psychiatric disorders not included above)
- Special populations: infancy, childhood, adolescence (including medication use and other psychiatric disorders not included above)
- Special populations: long-term care that is not age specified