



Certification Examination

CHPOP

Certified Hospital Pharmacy Operations Pharmacist



Recognition, Value, Expertise...

It is what certification is all about!

ABOUT CERTIFICATION

Competency-based certification allows pharmacists to demonstrate validated, practice-relevant knowledge in a defined specialty. Through CPS certification, candidates attest to professional accountability, lifelong learning, and safe, effective practice.

The Certification Commission for the Council on Pharmacy Standards (CC-CPS) is the independent body that designs, governs, and maintains CPS certification and recertification programs. CC-CPS operates at arm's length from CPS education and operations, with formal conflict-of-interest controls, documented firewalls, and term limits to preserve independence.

CC-CPS follows recognized best-practice frameworks, including ISO/IEC 17024, the Standards for Educational and Psychological Testing (AERA/APA/NCME), and guidance from ICE and NCCA.



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CANDIDATE
HANDBOOK



> ELIGIBILITY CRITERIA

All eligibility criteria must be met at the time of application

CURRENT LICENSURE

Candidates must hold a Doctor of Pharmacy (Pharm.D.) or Bachelor of Science in Pharmacy (B.S. Pharm.) degree from a program accredited by the Accreditation Council for Pharmacy Education (ACPE). Graduates of programs outside of the U.S. must hold a degree deemed equivalent and/or possess a Foreign Pharmacy Graduate Examination Committee® (FPGEC) Certificate.

PRACTICE EXPERIENCE

Current/active unrestricted licensure as a pharmacist is required. An "unrestricted" license is not currently subject to any limitations, probation, or disciplinary action.

- **U.S. Licensed Pharmacists:** Must possess an active, unrestricted license to practice pharmacy in at least one U.S. state or territory.
- **International Pharmacists:** Must hold an active and unrestricted license in their country of practice. A certified English translation must be provided if the original license is not in English.

Candidates will need to upload their license or a printout of the verification that includes their name, license number, licensing state or country, and the date the license expires.

SPECIALTY QUALIFICATION

To ensure candidates have foundational knowledge in the specialty, one of the following two pathways must be met:

1. **Standard Pathway:** Completion of one year (12 months) of experience comprised of at least 2000 hours of practice time as a licensed pharmacist in one of the above exam specialties must be documented. **This is not an either/or requirement – both time and hours must be met.**
2. **Certificate Pathway:** The specialty experience requirement is met for candidates who hold an active certificate of completion from a nationally recognized provider in a related subject matter. This includes, but is not limited to, the completion of a relevant PGY residency, fellowship, certificate/training program, or a relevant graduate degree. Recognized providers include:
 - American Society of Health-System Pharmacists (ASHP)
 - American Pharmacists Association (APhA)
 - American College of Clinical Pharmacy (ACCP)
 - American Society of Consultant Pharmacists (ASCP)

CANDIDATE HANDBOOK

RESOURCES

CPS Exam Candidates

Use the Study Guides & Preview Tests page as the official and most current source for all exam materials.

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How to find your materials

1. Visit pharmacystandards.org/study-guides.
2. Search by certification name or acronym (e.g., CPOM).
3. Open the items under your credential:
 - o **Outline** – Exam content outline & competencies
 - o **Guide** – Candidate Guide with policies, sample items, and study tips
 - o **Case Study** – Scenario-based practice
 - o **Preview** – Short preview quiz
 - o **Practice Exam** – Practice test with scoring



Before you register

- Read your Candidate Guide and Testing Guide (remote proctoring rules, ID requirements, system check, reschedule/cancel windows).
- Confirm your name on the account **matches your government ID**.
- Run the **system check** on the device and network you will use on test day.

Need help?

See FAQs or Contact Us from the Study Guides page.

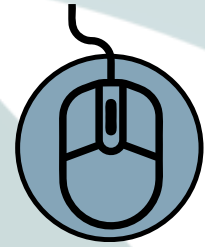
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Group Fee Payments

CPS will accept group payments for certification exams from institutions. Details are on the CPS website.

FEES

All fees are
non-refundable



\$395
TOTAL EXAM FEE

Application + Examination
Includes a **non-refundable**
\$50 application fee.

Examination Fees

- The total exam fee is \$395 (= \$50 Application + \$345 Examination).
- The \$50 application fee is non-refundable.
- If you are found ineligible, CPS refunds the \$345 examination portion automatically.
- After you schedule an appointment, reschedule/cancel windows and fees apply (see Administrative Policies, pp. 9–11).
- Payments are online only by Visa, Mastercard, or American Express (U.S. dollars).
- If paid by a third party (e.g., employer), any permitted refund is issued to that payer.
- Applications are not accepted by mail, phone, or fax.

Note: If an applicant is determined ineligible, CPS refunds the \$345 examination portion. The \$50 application fee is non-refundable.

Other Non-refundable Payment Related Fees

Incomplete Application Fee



All incomplete applications are subject to a non-refundable \$30 reprocessing fee upon the submission of proper documentation. See page 9 for more information.

License Verification



If licensure information is requested requiring an additional submission, the candidate will have two weeks to provide the license with all the correct information and pay the non-refundable \$30 reprocessing fee. If this is not provided within the two weeks, the application will be marked ineligible. Ineligible applicants will receive a refund minus the \$50.00 non-refundable application fee. There are no refunds or withdrawals for applications using a bulk code.

Credit Card Chargeback



Assessed only if a credit-card dispute is resolved in CPS's favor. Future registrations may be blocked until balances are cleared.

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FEES

All fees are
non-refundable

Other Exam Related Fees

**Reschedule
(date/time) — \$50**



Allowed **≥ 48 hours** before your appointment via your CPS account. Changes inside 48 hours are not permitted; the **no-show** policy applies.

**Exam Change —
\$125**



Administrative change to switch to a different exam (before an appointment is scheduled). May require re-review of eligibility.

Withdrawal — \$165



Cancel your exam before scheduling or **≥ 7** days before your appointment to withdraw. CPS refunds the examination portion (\$345) minus \$165. Within 7 days, or after a no-show, the examination portion is forfeited. See Administrative Policies (pp. 9–11) for full timelines.

Retest — \$395



Retest candidates must pay the full application (\$50) and examination (\$345) fees and must observe a 45-day wait before reapplying.
See Retest Policy (p. 9).

Computer exam candidates can change their scheduled testing date to a **\$50 non-refundable fee**.

Candidates may do this from within their CPS account.

Refer to CPS Testing Guide for details.

Refunds

Ineligible Computer Testing Applicants will receive a refund of the \$345 examination portion (the **\$50 application fee is non-refundable**) minus any outstanding charges.

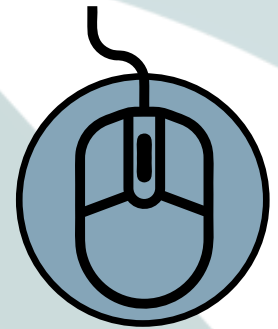
No refunds

will be issued for the following circumstances:

- Candidates who are not successful in achieving certification.
- No-shows or candidates who fail to test.
- Candidates who are unable to schedule within the eligibility period and do not withdraw per policy.
- Once an exam session has started.

STEPS TO REGISTER

HOW TO REGISTER FOR A CPS EXAM (REMOTE, COMPUTER-BASED)



STEP
1

Confirm eligibility

Review the **Eligibility Criteria** for your credential (link to section).

STEP
2

Submit your application

Submit your application online at the CPS website **PharmacyStandards.org**. Applications can only be submitted online. You cannot submit an application by mail, telephone or fax. Payment must be made online by credit card. Individual or group payments can be made.

STEP
3

Prepare your documents

To get prepared to complete the application - *see the application checklist on the next page*. It is a handy listing of all the information you will need to supply.

STEP
4

Email confirmation of your registration

After completing and submitting the application, you will receive an email confirmation within 30 minutes. **This will be the ONLY confirmation notice you will receive for your application. If you do not receive it, please make sure the email in your profile is accurate and check your email folders.**

STEP
5

Application approval procedure

The application will be reviewed to determine qualification to take the examination. This process can take up to two weeks, depending on the volume of applications received at the time of submission. If the application is incomplete, *see page 10* to learn how to resubmit the application and what fees will need to be paid.

STEP
6

Notification of eligibility to take the exam

If approved, an Eligibility Letter will be emailed and posted in your CPS account with instructions to schedule your exam.

Before scheduling:

- Run the system check on the device/network you will use.
- If you need accommodations, submit your request before booking.
- Ensure your account name matches your government ID.

Eligibility period: You must schedule and test within your 365-day eligibility period (see your letter).

CPS is not responsible for lost or misdirected email. **Please make sure the email in your profile is accurate and check your account 5-7 days after you have registered** to ensure your application was complete and additional information is not needed. If you do not receive your examination eligibility letter within 2 weeks of your examination application submission confirmation, use the "Contact Us" link on **PharmacyStandards.org** and select "Application I already submitted" from the drop down menu, to inform CPS.

APPLICATION CHECK LIST

Before filing your application look over the below checklist and gather the information needed to complete it.

PERSONAL INFORMATION:

You have complete contact details (name as it appears on your government ID, address, phone, email). Your CPS profile email is current and monitored.

ELIGIBILITY:

You reviewed the eligibility requirements and meet one pathway (Standard or Certificate/Training)

LICENSURE:

You have your pharmacist license or primary-source verification showing name, license number, jurisdiction, type, and expiration date ready to upload. If not in English, include a certified English translation. Non-US grads include FPGEC® Certification (as applicable). Your license name matches your government ID or you have legal name-change proof.

EMPLOYMENT:

You know your current employer contact info (address, phone, email) and have 5-year work history (titles, dates, specialty area, supervisor/contact). Include gaps/unemployment where applicable.

SPECIALTY QUALIFICATION DOCUMENTS:

You have documentation for your pathway:

- Standard: summary of qualifying duties and estimated 2,000 hours/12 months within the stated window (verifiable).
- Certificate/Training: certificate of completion (or PGY/residency/fellowship/degree) plus syllabus/competency summary.

APPLICATION AGREEMENT:

You will check the agreement box to e-sign the statements below. Applications cannot be submitted without consent.

I have read and agree to abide by CPS policies in the Candidate Guide and Testing Guide, including fees, reschedule/withdrawal timelines, and conduct rules. I understand and consent to remote proctoring, including room scan, screen share, and audio/video recording for security and audit. I certify the information provided is true and complete; I understand that false or misleading statements may result in denial, invalidation, or revocation. I understand my application is subject to audit and authorize CPS to contact employers, licensing boards, and education providers to verify information. I acknowledge the \$50 application fee is non-refundable and that other refunds are governed by the published policy.

ADMINISTRATIVE POLICIES

Incomplete Application Processing

An application is **incomplete** if any of the following apply:

- Missing or incorrect information.
- Licensure proof missing required data (name, license number, jurisdiction, type, expiration date) or is not in English without a certified translation.
- Payment not authorized or reversed (declined card, return, or chargeback).
- Any issue that prevents CPS from determining eligibility.

Process:

Incomplete applications are returned with instructions to upload the missing items and pay a **non-refundable \$30 reprocessing fee**. All filing deadlines continue to apply. If the resubmission does not fully resolve deficiencies, the application is declared ineligible (the **\$50 application fee is not refundable**).

Retest Policy

Candidates who wish to retake a CPS exam must submit a **new application**, meet the then-current eligibility criteria, and pay the **full application (\$50) and examination (\$345) fees**. CPS does not limit lifetime attempts, but the maximum number of attempts in a calendar year is **three (3)**. Each retest uses a different form of the exam.

Mandatory waiting period

- A **45-day wait is required from the date/time of the last attempt before submitting a retest application or scheduling a new appointment**.
- The wait applies to all delivery modes of testing and all exam forms.
- Applications submitted before the 45-day mark are **not accepted**. If submitted in error, the **application fee remains non-refundable**.

Interruption / invalid attempt rules

- If an exam session experiences **candidate-side** failure (device, internet, environment, refusal of proctoring/ID), the attempt is **invalid** and a retest after 45 days is required; fees follow the **No-Refunds** policy.
- If CPS or the test vendor causes the outage, CPS will provide a no-cost reschedule of the same attempt (no 45-day wait) or, if the attempt cannot be restored, a retest after 45 days without additional fees beyond the original exam fee.

Result notice

- The 45-day date is shown on the candidate's **results/attempt notice** and in the CPS account.

All timelines and fees are governed by the most current online policy at [pharmacystandards.org](https://www.pharmacystandards.org); online versions supersede print.

All policies and procedures are subject to change without notice

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ADMINISTRATIVE POLICIES

Changes & Withdrawals

Reschedule (date/time) — \$50 non-refundable

For the same exam, you may change your appointment \geq 48 hours before the start time via your CPS account.

- Must remain within your 365-day eligibility period.
- Limit: 1 reschedule per registration (additional changes require a withdrawal + new registration).
- No changes allowed $<$ 48 hours before the appointment or on exam day.
- See Fees for no-show rules.

Exam or Eligibility-Window Change — \$125 non-refundable

Use this to switch to a different CPS exam or to adjust your eligibility period (no appointment scheduled yet).

- Re-establish eligibility for the new exam; CPS may request additional documentation.
- Any approved change uses the original 365-day period (no reset).
- Request must be submitted \geq 30 days before the end of your eligibility period.
- Limit: 1 exam/window change per registration.
- No refunds of original fees or the change fee.

Rescheduling (same exam): \$50 | Exam change: \$125**All candidates requesting a change****MUST:**

- Submit the change request within one calendar year from the first date of their original assigned eligibility period.
- Cancel their exam date (if they have one scheduled), before submitting a change. Scheduled exams may also be canceled using the "Schedule" link in your account.
- Use the CPS website online Change Request Form.
- Submit a non-refundable fee of \$125 with the Change Request Form.

Not permitted

- Changes on exam day or after the appointment start time.
- Switching exams after check-in begins.
- Only CPS pharmacy credentials may be selected.

To change examination category:

- Eligibility must be re-established for the new exam category, and additional documentation and fees may be required.
- The time to consider eligibility for the new category will count toward the original assigned computer testing window.
- **Examinees must take the exam for which they have been determined eligible. No changes will be permitted on examination day.** If a candidate knowingly or unknowingly takes an examination other than they were found eligible to take, the examination will not be scored. No refunds will be allowed, and all fee policies will apply if the candidate reapplies for an examination.
- Candidates must submit their request at least 30 days prior to the end of their 365-day eligibility period.

ADMINISTRATIVE POLICIES

Withdrawal Policy - Computer Testing

- Only the applicant/candidate may request a withdrawal.
- When you may withdraw:
 - Before scheduling an appointment, or
 - ≥ 7 days before your scheduled appointment time (withdrawal cancels the appointment).
- Refund: CPS refunds the examination portion (\$345) minus a \$165 withdrawal fee \rightarrow \$180. The \$50 application fee is not refundable. Any outstanding charges are deducted from the refund.
- Requests < 7 days before the appointment or after a no-show are not eligible for any refund.

Withdrawal Policy - Bulk Purchase Voucher

Withdrawals are not allowed after eligibility is determined. Refunds are governed by the bulk purchase agreement; CPS does not issue refunds for redeemed codes. (Institutions manage reassignment within their terms.)

Substitution Policy

Candidate substitutions are not allowed. The name on the registration must match the government ID presented on test day. Name changes require legal documentation before scheduling.

Score Cancellation

CPS may cancel scores and/or invalidate an attempt for irregularities (e.g., identity mismatch, prohibited items, coaching, tampering, exam content disclosure, policy violations) with or without proof of intent. Fees are not refunded. CPS may impose waiting periods or bar future testing per policy.

Auditing Applications

Applications are subject to audit. Candidates must provide requested documentation (e.g., licensure, employment verification, training certificates) within 14 days. Failure to respond or verify may result in denial or revocation. By submitting an application, you authorize CPS to contact employers, licensing boards, and education providers for verification.

All policies and procedures are subject to change without notice

CANDIDATE
HANDBOOK**Test Disclosure**

CPS does not release live test questions, answer keys, or full forms. Using, sharing, soliciting, or possessing exam content—before or after testing—is a security violation and may result in score invalidation, revocation, and suspension of testing privileges.

GENERAL POLICIES

How Exams are Scored

CPS exams are **criterion-referenced**: your outcome is compared to a predefined performance standard, **not** to other candidates. The passing standard is set through periodic **standard-setting studies** (e.g., Angoff/Bookmark) conducted with subject-matter experts and approved by the CPS Board.

CPS uses **item response theory (IRT)** and **test equating** to place different forms of the exam on a common scale. Because some forms may be slightly harder or easier, equating ensures fairness—candidates meeting the standard on any form receive the **same pass/fail decision**.

Score reports provide:

- Your **overall result** (Pass/Fail).
- **Content-area diagnostics** to guide study. These diagnostics are **not percent correct** and are **not comparable** across candidates or attempts. Labels indicate performance **relative to the standard** (e.g., **Below Target / Near Target / At Target / Above Target**).

The passing standard may be reviewed periodically to reflect current practice and blueprint updates.

Retention of Computer Answer Strings

CPS retains computer answer strings and operational testing data for a minimum of 3 years and may retain longer for quality assurance and legal/regulatory purposes. Identity verification media (e.g., audio/video from remote proctoring) are retained per the CPS Privacy & Data Retention Policy.

All policies and procedures are subject to change without notice

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Designation Authorization

Certification is a non-transferable, revocable, limited, non-exclusive license to use the certification designation, subject to compliance with the policies and procedures, as may be revised from time to time.

Any use or display of CPS certification marks and/or logos without the prior written permission of the CPS is prohibited. Any candidate or certificant who manufacturers, modifies, reproduces, distributes or uses a fraudulent or otherwise unauthorized CPS certificate, CPS designation or other credential may be subject to disciplinary action, including denial or revocation of eligibility or certification. Any individual who engages in such behavior also may be subject to legal action.

GENERAL POLICIES

ADA and Nondiscrimination Policies

CPS does not discriminate on the basis of **age, sex, pregnancy, race, color, religion, national origin, ethnicity, disability, marital status, sexual orientation, gender identity or expression, military/veteran status, or genetic information.**

Testing accommodations. CPS provides **reasonable accommodations** consistent with the Americans with Disabilities Act (ADA) for qualified candidates. Requests must be **submitted with the application and before scheduling** an appointment, using the CPS Accommodation Request Form (see **pharmacystandards.org/accommodations**). Documentation must be **current** and signed by a qualified clinician describing the functional limitations and recommended accommodations. CPS will acknowledge requests within **5 business days** and issue a determination within **15 business days** of receiving complete documentation. Information is **confidential** and used only for accommodation determinations. Denials may be **appealed** per the Appeals Procedure below.

Appeals Procedure

Candidates may appeal eligibility determinations, accommodation decisions, exam administration irregularities, or policy applications. Appeals must be **submitted in writing within 60 days** of the decision or event and should include relevant facts and supporting documents. CPS will acknowledge receipt within **5 business days** and render a written decision within **30 days** (or notify if additional time is required). Appeals are reviewed by the **CPS Policy Review Committee**, independent of the original decision maker, and may be escalated to the **Board of Directors**. CPS does **not** release exam content or answer keys; score verification involves **administrative/technical re-scoring only**.

Revocation

Certification may be denied, suspended, or revoked for: falsification or misrepresentation; **exam security violations** (cheating, proxy testing, item disclosure); misuse of CPS names, logos, or marks; failure to meet or maintain eligibility/recertification requirements; **loss or restriction of the license to practice pharmacy**; nonpayment of required fees; or other material policy violations.

Prior to action, CPS will provide **written notice** of the allegations and an opportunity to **respond**. A written decision (which may include sanctions and eligibility to reapply after a specified period) will be issued and may be **appealed** under this policy.

All policies and procedures are subject to change without notice

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For further details, visit the CPS website PharmacyStandards.org and download the recertification catalog for a full description of the recertification process. Click on **Renew your Certification** on the home page.

GENERAL POLICIES

Renew Your Certification

CPS requires **recertification every three (3) years** to verify ongoing competence in each credential's core knowledge areas.

Recertification Steps

Earn the required credit using either:

1. Continuing Education (CE) that fits your topics, or
2. Approved professional activities (e.g., teaching, publications, precepting, quality-improvement/projects, committee work).
3. Finish within 3 years, upload documentation, and keep records for audit.

Lapse & Reinstatement

If requirements are **not met by the deadline**, the credential **expires**. Expired credentials may be regained only through **re-examination**, subject to the then-current eligibility criteria. CE completed **after** expiration cannot be applied retroactively.

Audits & Recordkeeping

CPS randomly audits recertification applications. If selected, you must provide CE certificates and short activity descriptions within the requested timeframe. Maintain CE documentation **throughout the cycle and until approval**.

Verification of Your Credential

CPS provides **third-party verification** of active credentials on request.

- **When available:** After official results post to your CPS account and your digital certificate is issued.
- **What is verified:** Credential name and ID (if applicable), **status** (active/expired), **original certification date**, and **current expiration date**.
- **How to request:** From the CPS website (see pharmacystandards.org/verification), select **Request a Verification**, enter the recipient's email, and submit payment.
- **Fee & delivery: \$30 per request.** Verifications are sent by email to the designated party.
- **Notes:** CPS cannot verify until certification is achieved. Ensure your name and profile information are accurate before submitting a request.

All policies and procedures are subject to change without notice

CANDIDATE HANDBOOK

How to Study

CPS does not provide review courses or study materials for the examination. CPS views the examinations as an evaluative process. Eligibility criteria have been established to identify minimum levels of preparation for the examinations. CPS believes your practice experience is your best preparation. Candidates can review detailed test outlines and suggested resources in the Candidate Guides.

EXAM CONTENT OUTLINE

Domain 1: Medication Order Management and Clinical Review (20%)

Task 1: Evaluate the clinical appropriateness of medication orders.

Apply a systematic process to clinically screen and verify medication orders within the EHR.

Differentiate medication appropriateness based on patient-specific parameters (e.g., diagnosis, organ function).

Assess orders for appropriate therapeutic drug monitoring, dose adjustments, and duration of therapy.

Analyze medication profiles to resolve therapeutic duplications and other prescribing problems.

Coordinate with medical staff to resolve discrepancies or concerns identified during order verification.

Task 2: Design and manage medication reconciliation workflows.

Develop operational workflows to support medication reconciliation upon admission, transfer, and discharge.

Assess medication histories to identify and resolve discrepancies between home and inpatient medication orders.

Implement policies to ensure a final, reconciled medication list is communicated to outpatient providers.

Evaluate the effectiveness of transitions of care processes to ensure medication safety.

Collaborate with nursing and physicians to optimize interdisciplinary reconciliation processes.

Task 3: Assess and resolve potential drug-related problems.

Utilize clinical decision support systems to screen for drug-drug, drug-allergy, and drug-laboratory interactions.

Differentiate the clinical significance of alerts to mitigate alert fatigue and focus on high-risk scenarios.

Evaluate documented allergies and assess potential cross-sensitivities before dispensing.

Manage order sets and protocols to minimize potential drug-related problems proactively.

Recommend alternative therapies to prescribers when significant interactions are identified.

Task 4: Apply institutional protocols and formulary management policies.

Execute automatic therapeutic interchange, IV-to-PO, and renal dosing protocols.

Manage adherence to institutional policies for restricted medications and stewardship programs (e.g., antimicrobial, opioid).

Design verification procedures to ensure compliance with policies for high-alert medications.

Assess medication orders for compliance with the institution's approved formulary.

Communicate formulary-driven changes and non-formulary requests to the medical team.

Task 5: Evaluate complex or high-risk medication orders.

Analyze parenteral nutrition orders for appropriateness, stability, and compatibility.

Verify that chemotherapy orders adhere to established treatment regimens and safety protocols.

Perform independent double-checks of all complex or high-risk medication calculations.

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EXAM CONTENT OUTLINE

Assess the appropriateness of supportive care medications for complex regimens (e.g., chemotherapy).

Reconcile orders against established protocols for patient-controlled analgesia and epidurals.

Task 6: Coordinate pharmacy services during clinical emergency response.

Design the pharmacist's role and responsibilities during emergency codes (e.g., code blue) and rapid response calls.

Manage the process for preparing and dispensing emergency medications.

Evaluate medication therapy provided during a clinical emergency for appropriateness.

Ensure accurate documentation of medications administered during an emergency event.

Participate in post-event debriefings to identify opportunities for process improvement.

Domain 2: Medication Preparation and Dispensing (20%)

Task 1: Apply USP General Chapter <797> standards to sterile compounding operations.

Design workflows that ensure consistent application of aseptic technique and proper garbing.

Manage the environmental monitoring, cleaning, and certification of the cleanroom suite.

Validate that appropriate beyond-use dates (BUDs) are assigned based on sterility risk level and storage.

Assess staff competency through required quality assurance procedures like media-fill and gloved fingertip testing.

Develop policies and procedures to maintain a constant state of compliance with USP <797>.

Task 2: Apply USP General Chapter <795> standards to non-sterile compounding operations.

Evaluate compounding techniques for various non-sterile dosage forms to ensure product quality.

Apply the principles of geometric dilution and other techniques to ensure a uniform mixture.

Determine appropriate beyond-use dates (BUDs) for non-sterile preparations based on stability data.

Design and maintain a system for complete and accurate compounding records.

Assess the suitability of components and equipment used in non-sterile compounding.

Task 3: Apply USP General Chapter <800> standards to hazardous drug (HD) handling.

Manage all containment strategies for the receipt, storage, compounding, and disposal of HDs.

Assess the appropriate use of personal protective equipment (PPE) for all HD handling activities.

Evaluate the performance of containment primary and secondary engineering controls.

Design training and competency programs for all personnel who handle HDs.

Develop a comprehensive plan for managing HD spills and personnel exposure events.

Task 4: Manage the product verification and final check process.

Design a safe and efficient workflow for the final verification of medications prepared by technicians.

Differentiate between tasks that require a pharmacist's check and those suitable for tech-check-tech programs.

Utilize technology (e.g., barcode scanning, imaging) to enhance the accuracy of product verification.

Assess the quality and accuracy of technician work and provide constructive feedback.

Evaluate dispensing error rates and implement corrective actions to improve the verification process.

Task 5: Manage quality control for compounded and repackaged products.

Design a quality assurance program for all in-house compounding and repackaging activities.

Perform required quality control checks on finished preparations to ensure accuracy and integrity.

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EXAM CONTENT OUTLINE

Establish appropriate beyond-use dates for repackaged medications based on stability and packaging.

Maintain comprehensive records of all repackaging and compounding activities for audit purposes.

Investigate and resolve any out-of-specification results from quality control testing.

Task 6: Manage medication packaging and labeling to ensure patient safety.

Select appropriate packaging for dispensed medications to maintain their stability and integrity.

Design medication labels that comply with all state, federal, and institutional requirements.

Apply safety strategies like tall man lettering and standardized concentrations on labels.

Evaluate the use of auxiliary labels to provide clear instructions and warnings to healthcare providers.

Assess the barcoding process to ensure scan-ability at the point of administration.

Domain 3: Automation, Technology, and Informatics (15%)

Task 1: Manage automated dispensing cabinet (ADC) systems.

Design ADC configurations and inventory levels to optimize medication availability and security.

Analyze ADC data (e.g., override reports, stockouts) to identify safety risks and workflow inefficiencies.

Manage user access controls and security settings to prevent unauthorized access.

Evaluate ADC performance to ensure system integrity and reliability.

Troubleshoot and resolve discrepancies and other ADC-related issues in collaboration with nursing.

Task 2: Manage centralized pharmacy automation and robotics.

Evaluate the operational performance of centralized automation (e.g., carousels, robotic fillers, IV workflow systems).

Manage the packaging, barcoding, and calibration processes required for automated systems.

Perform quality assurance checks to validate the accuracy of automated dispensing and compounding.

Develop downtime procedures and contingency plans for automation failures.

Assess the integration of robotics with the pharmacy information system to ensure data integrity.

Task 3: Utilize Pharmacy Informatics and Data Analytics for Decision-Making.

Extract and analyze operational data from various systems (e.g., MAR, ADC, BCMA logs, EHR reports).

Build and maintain operational dashboards for real-time monitoring of KPIs (e.g., turnaround times, workload, error rates).

Apply predictive analytics to forecast medication inventory requirements and staffing needs.

Translate data trends into actionable insights for process improvement and resource allocation.

Present data-driven insights and business intelligence to leadership and hospital committees.

Task 4: Evaluate the performance of the integrated medication-use technology ecosystem.

Assess the integration and data flow between the PIS, EHR, ADCs, and BCMA systems.

Collaborate with IT to test and implement new system upgrades or functionality.

Manage the pharmacy information system's drug database to ensure accuracy and clinical relevance.

Analyze barcode medication administration (BCMA) scanning compliance and override data to identify safety risks.

Investigate and resolve technology-related medication errors and near misses.

Task 5: Design and optimize medication distribution models.

Differentiate the benefits and drawbacks of various models (e.g., centralized, decentralized, hybrid).

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EXAM CONTENT OUTLINE

Assess medication delivery workflows (e.g., STAT, routine, cart-fill) to improve efficiency and turnaround times.

Develop a standardized process for crediting and returning unused medications to the pharmacy.

Manage the security and integrity of medications throughout the distribution chain.

Evaluate the need for alternative delivery methods, such as pneumatic tube systems or courier services.

Task 6: Manage pharmacy supply chain and inventory control systems.

Apply inventory management principles (e.g., PAR levels, turnover rates) to optimize stock and minimize waste.

Manage the process of ordering, receiving, and stocking medications from various suppliers.

Develop and implement policies for handling drug product returns, recalls, and expired medications.

Ensure compliance with the Drug Supply Chain Security Act (DSCSA) during medication receipt and transfer.

Utilize inventory management software to track stock and automate purchasing.

Domain 4: Operational Compliance, Safety, and Quality Systems (15%)

Task 1: Manage continuous readiness for accreditation and regulatory inspections.

Apply standards from The Joint Commission (TJC), DNV, and CMS to daily pharmacy operations.

Design and conduct internal audits to assess compliance with accreditation standards.

Lead preparations for external inspections by state boards of pharmacy and other regulatory bodies.

Develop and implement corrective action plans in response to survey findings.

Educate staff on their roles and responsibilities during regulatory surveys.

Task 2: Manage controlled substance security and diversion prevention programs.

Apply all DEA and state regulations for the procurement, storage, dispensing, and disposal of controlled substances.

Design and manage a robust system for recordkeeping and reconciliation of all controlled substance transactions.

Analyze surveillance data and audit reports to detect and investigate potential drug diversion.

Implement security measures for all automated systems and storage areas containing controlled substances.

Report and manage confirmed cases of diversion according to institutional policy and legal requirements.

Task 3: Lead continuous quality improvement (CQI) projects.

Apply CQI methodologies (e.g., LEAN, Six Sigma, PDSA cycles) to improve pharmacy operations.

Analyze medication event data to identify system vulnerabilities and prioritize improvement initiatives.

Lead multidisciplinary teams to investigate significant medication events using tools like root cause analysis (RCA).

Benchmark pharmacy performance against internal goals and external best practices.

Develop, monitor, and report on key quality and performance metrics for the department.

Task 4: Implement medication safety best practices across the organization.

Integrate ISMP best practices and National Patient Safety Goals into pharmacy policies and workflows.

Design and promote strategies to reduce the risk of errors with high-alert medications.

Manage the organization's look-alike, sound-alike (LASA) medication list and differentiation strategies.

Participate in and provide operational expertise to the organization's medication safety committee.

Evaluate the effectiveness of implemented safety initiatives through ongoing monitoring.

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EXAM CONTENT OUTLINE

Task 5: Manage pharmacy's role in emergency preparedness and disaster response.

Design and implement pharmacy downtime procedures for all critical information systems.

Coordinate pharmacy participation in hospital-wide disaster drills and mass casualty incident planning.

Develop business continuity plans for the drug supply chain during pandemics or widespread shortages.

Manage the procurement, storage, and maintenance of emergency medication caches and code carts.

Assess post-event performance to refine the emergency response plan.

Task 6: Develop and manage policies and procedures.

Develop new policies and procedures to address changes in regulations, standards, or practice.

Manage the process for reviewing and updating all departmental policies on a regular schedule.

Communicate and educate staff on new or revised policies and procedures.

Monitor staff adherence to established policies and provide coaching when necessary.

Ensure all policies are readily accessible to staff for reference.

Domain 5: Leadership, Training, and Human Resource Management (15%)

Task 1: Develop and assess staff competency.

Design a comprehensive training and orientation program for new pharmacy employees.

Develop and implement an annual competency assessment program for pharmacists and technicians.

Evaluate staff competency in critical areas (e.g., sterile technique, USP standards, technology use).

Maintain all required documentation for staff training and competency assessments.

Create individualized development plans for staff based on competency assessment results.

Task 2: Manage pharmacy workforce and workflow distribution.

Develop and manage staffing schedules to ensure adequate coverage for all operational areas.

Assess daily workload and distribute tasks among staff to ensure timely medication delivery.

Analyze productivity metrics to optimize staffing models and justify resource needs.

Implement strategies to manage fluctuations in workload and staffing levels.

Define and optimize the roles and responsibilities of pharmacists and technicians within the workflow.

Task 3: Mentor and educate pharmacy residents, students, and technicians.

Design and implement training experiences for pharmacy students and residents in operational practice.

Provide constructive, timely feedback to learners and staff to foster professional growth.

Mentor pharmacists and technicians to support their career development goals.

Model professional behavior and a commitment to lifelong learning.

Evaluate the effectiveness of training programs and make improvements based on feedback.

Task 4: Promote staff well-being, engagement, and professional development.

Implement strategies to recognize and address staff burnout and promote resilience.

Foster a positive work environment that promotes teamwork, respect, and open communication.

Develop a system for recognizing and rewarding staff contributions and achievements.

Support opportunities for staff to pursue professional development and continuing education.

Manage interpersonal conflicts and facilitate resolutions to maintain a healthy team dynamic.

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EXAM CONTENT OUTLINE

Task 5: Lead Interprofessional and External Collaboration.

Serve as a liaison between the pharmacy department and other hospital departments to optimize the medication-use system.

Communicate changes in pharmacy policies, procedures, or services to relevant stakeholders.

Lead or participate in interdisciplinary committees to address system-level medication management issues.

Collaborate with external groups such as state boards of pharmacy or health-system collaboratives.

Contribute to health-system strategic planning and decision-making beyond the individual hospital.

Task 6: Uphold Ethical Principles and Professional Accountability.

Apply a consistent ethical framework to operational decisions, including those related to staffing and resource allocation.

Maintain the highest level of professional accountability in all leadership actions and communications.

Manage ethical dilemmas related to controlled substance management and diversion prevention.

Ensure patient confidentiality and data privacy are maintained in all pharmacy operations.

Promote a culture of accountability, integrity, and ethical conduct among all pharmacy staff.

Domain 6: Financial and Resource Stewardship (15%)

Task 1: Manage the pharmacy budget and financial performance.

Participate in the development of the annual pharmacy operating and capital budgets.

Monitor departmental expenditures (e.g., drug, supply, labor costs) against the budget.

Analyze financial reports to identify variances and opportunities for cost savings.

Develop strategies to control costs while maintaining quality and patient safety.

Prepare and present reports on the pharmacy's financial performance to leadership.

Task 2: Evaluate the cost-effectiveness of pharmacy automation and technology.

Conduct return on investment (ROI) analyses for proposed new technologies or automation.

Assess the total cost of ownership for existing technology, including maintenance and upgrades.

Evaluate the impact of technology on labor productivity and efficiency.

Justify capital budget requests for new technology with sound financial and operational data.

Benchmark the cost-effectiveness of the pharmacy's technology against similar institutions.

Task 3: Manage drug procurement, contracts, and inventory costs.

Evaluate purchasing contracts and relationships with wholesalers and group purchasing organizations (GPOs).

Analyze purchasing data to ensure compliance with contracts and maximize savings.

Implement strategies to optimize inventory turnover and minimize the cost of carrying inventory.

Manage compliance with federal programs that impact drug costs (e.g., 340B Drug Pricing Program).

Negotiate with vendors for favorable pricing and contract terms.

Task 4: Manage the operational and financial impact of drug shortages.

Develop and implement a proactive process for identifying and managing potential drug shortages.

Evaluate the clinical and financial impact of alternative therapies during a shortage.

Coordinate communication regarding drug shortages to prescribers, nursing, and other stakeholders.

Assess compounding and purchasing strategies to mitigate the impact of shortages.

Track and report on the increased costs associated with managing drug shortages.

EXAM CONTENT OUTLINE

Task 5: Analyze medication utilization and expenditure data to identify savings opportunities.

Conduct drug utilization evaluations (DUEs) to assess prescribing patterns and identify areas for intervention.

Analyze formulary compliance reports to identify opportunities for cost containment.

Evaluate the financial impact of new drugs being considered for formulary addition.

Collaborate with clinical pharmacists and physicians to promote the use of cost-effective therapies.

Develop and monitor metrics related to drug expense per patient day or other relevant measures.

Task 6: Justify resource allocation for pharmacy services and initiatives.

Develop business plans to justify the addition of new clinical or operational pharmacy services.

Quantify the expected clinical, safety, and financial benefits of proposed initiatives.

Present compelling arguments to hospital leadership to secure necessary resources (e.g., FTEs, technology, space).

Assess the allocation of existing resources to ensure they align with departmental goals.

Track the outcomes of new services to demonstrate their value to the organization.

**CANDIDATE
HANDBOOK**

ABOUT CPS

The Council on Pharmacy Standards (CPS) develops and administers professional certification programs for pharmacists. CPS awards credentials to qualified candidates who meet eligibility requirements and successfully pass the appropriate examination. Our programs validate advanced competence in contemporary practice areas, helping candidates demonstrate specialized expertise and employers verify it.

CPS certifications span pharmacy law and compliance, sterile and non-sterile compounding, immunization and public health, point-of-care testing, medication safety and quality, controlled substances stewardship, pharmacogenomics, telepharmacy, veterinary compounding, specialty pharmacy, and pharmacy informatics.

CPS PHILOSOPHY OF CERTIFICATION

Certification is a voluntary, rigorous evaluation that allows pharmacists to demonstrate advanced knowledge and be recognized for the expertise they possess. CPS certification and subspecialty examinations are designed to assess specialty knowledge and its application in contemporary pharmacy practice.

CPS credentials do not confer licensing authority or independent practice rights. Licensure and the ability to practice are governed by state boards of pharmacy and other applicable regulators. While some employers or jurisdictions may reference certification within their qualifications, CPS does not set licensure policy and cannot require recognition of its credentials. Practice and educational standards inform CPS examinations; however, the development of such standards rests with professional organizations, regulators, and the education community.

CPS encourages candidates to verify how certification relates to state licensure requirements, institutional policies, the standards of relevant professional organizations, and local employer expectations. For specific guidance, candidates should consult state boards of pharmacy, colleges and schools of pharmacy, professional associations, and prospective or current employers.