2025 | CANDIDATE HANDBOOK

COUNCIL ON PHARMACY STANDARDS

Certification Examination

CPOCTP

Certified Point-of-Care Testing Pharmacist

Council on Pharmacy Standards

COUNCIL ON PHARMACY STANDARDS

CANDIDATE HANDBOOK

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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> 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)

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:
   - **Outline** – Exam content outline & competencies
   - **Guide** – Candidate Guide with policies, sample items, and study tips
   - **Case Study** – Scenario-based practice
   - **Preview** – Short preview quiz
   - **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?

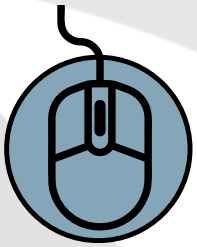
See FAQs or Contact Us from the Study Guides page.

FEES

All fees are non-refundable

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.



$395

TOTAL EXAM FEE

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

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

Group Fee Payments

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

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.

FEES

All fees are non-refundable

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.

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).

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:

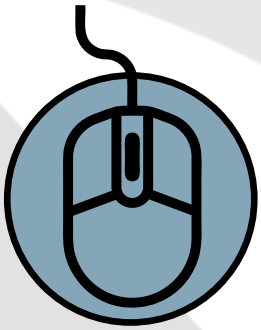
- Candidates who are not successful in achieving certification.
- No-shows or candidates who fail to test.
- Candidates who are unable to schedule within the eligibility period and do not withdraw per policy.
- Once an exam session has started.

COUNCIL ON PHARMACY STANDARDS

CANDIDATE HANDBOOK

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; online versions supersede print.

All policies and procedures are subject to change without notice

ADMINISTRATIVE POLICIES

CANDIDATE HANDBOOK

Changes & Withdrawals

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

For the same exam, you may change your appointment ≥ 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 ≥ 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 → $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

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.

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.

All policies and procedures are subject to change without notice

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.

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.

All policies and procedures are subject to change without notice

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**.

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.

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

EXAM CONTENT OUTLINE

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.

Domain 1: Regulatory and Quality Management (25%)

Task 1: Design and manage a point-of-care testing program in compliance with Clinical Laboratory Improvement Amendments (CLIA).

Differentiate between test complexities (waived, moderate, high) to ensure the program operates within its certified scope.

Manage the application and maintenance process for a CLIA Certificate of Waiver.

Develop and maintain standard operating procedures (SOPs) that ensure strict adherence to all manufacturer instructions.

Prepare the testing site and personnel for on-site inspections from regulatory bodies like CMS or state agencies.

Evaluate new tests to confirm they are categorized as waived before implementation.

Task 2: Implement a comprehensive Quality Management (QM) program.

Design a QM plan that encompasses the entire testing process, from sample collection to results reporting.

Establish a robust quality control (QC) protocol, including documentation of all QC activities and corrective actions.

Manage proficiency testing (PT) programs, from sample handling to root cause analysis of any failures.

Conduct periodic quality assessment reviews to identify trends and drive continuous process improvement.

Apply principles from global quality standards (e.g., ISO, CLSI) to enhance the QM program beyond baseline compliance.

Task 3: Develop and manage a personnel training and competency assessment program.

Design a standardized training curriculum for all staff involved in testing.

Conduct initial competency assessments using multiple methods (e.g., direct observation, written exam) before allowing independent testing.

Implement a schedule for ongoing annual competency reassessments for all testing personnel.

Develop and execute corrective action and retraining plans for any competency failures.

Train technicians, interns, and other support staff in CLIA-waived testing under direct pharmacist supervision.

Task 4: Apply Occupational Safety and Health Administration (OSHA) and other safety standards.

Implement an exposure control plan based on the OSHA Bloodborne Pathogens Standard.

Ensure all staff are trained on universal precautions and the proper use of personal protective equipment (PPE).

Manage the segregation and disposal of biohazardous waste according to federal, state, and local regulations.

Design a post-exposure prophylaxis (PEP) protocol and ensure staff know how to respond to an exposure event.

Conduct regular safety audits of the testing environment to ensure ongoing compliance.

Task 5: Maintain a compliant and inspection-ready documentation system.

Design a record-keeping system that captures all required elements for patient tests, QC, and maintenance.

Implement a process for the periodic review and sign-off of QC and maintenance logs.

Ensure all records are maintained for the minimum required period (e.g., two years) and are easily retrievable.

Manage the version control and periodic review of all standard operating procedures.

EXAM CONTENT OUTLINE

Organize all regulatory, quality, and personnel records in a manner that facilitates an efficient inspection.

Task 6: Investigate and resolve quality failures and testing errors.

Design a systematic process for investigating any QC failure, proficiency testing failure, or patient complaint.

Apply root cause analysis techniques to identify the source of an error.

Develop and implement an effective corrective and preventive action (CAPA) plan.

Document the entire investigation and resolution process from start to finish.

Assess the impact of a testing error on any patient results and take appropriate notification steps.

Domain 2: Test Performance and Interpretation (25%)

Task 1: Evaluate and select appropriate CLIA-waived tests for a specific practice.

Assess the health needs of the target patient population to determine the most relevant tests to offer.

Compare the performance characteristics (e.g., sensitivity, specificity) of different test kits or platforms.

Evaluate the operational workflow, cost, and reimbursement of potential new tests.

Ensure any selected test aligns with the pharmacy's collaborative practice agreements and state scope of practice.

Design a validation or verification process for new tests before they are used for patient care.

Task 2: Apply principles of test performance characteristics to result interpretation.

Differentiate between analytical and clinical sensitivity and specificity.

Evaluate how disease prevalence in a population affects the positive and negative predictive values of a test.

Assess the analytical measurement range and identify potential interferences for a given test.

Interpret the manufacturer's package insert to understand the test's principles and limitations.

Explain the possibility of false positive or false negative results to patients and providers.

Task 3: Manage the pre-analytical phase, including specimen collection and handling.

Apply proper technique for a variety of specimen collection methods (e.g., fingerstick, nasal swab).

Design a workflow that ensures positive patient identification and correct specimen labeling at all times.

Implement procedures to maintain specimen integrity from collection to testing.

Develop clear, patient-friendly instructions for any self-collected samples.

Troubleshoot pre-analytical errors (e.g., improper collection, insufficient sample) that can lead to inaccurate results.

Task 4: Execute test procedures with strict adherence to manufacturer instructions.

Manage the storage and inventory of test kits and reagents to prevent the use of expired or improperly stored materials.

Perform all required quality control procedures as part of the standard testing workflow.

Operate and maintain testing instruments according to the manufacturer's user manual.

Apply precise timing and procedural steps to ensure the validity of the test run.

Differentiate between a valid test run and one that is invalid due to a control failure.

Task 5: Interpret and document qualitative and quantitative test results.

Differentiate between qualitative, semi-quantitative, and quantitative results and document them appropriately.

Assess the validity of a qualitative test result by confirming the integrity of the control line or indicator.

Evaluate quantitative results in the context of established reference ranges and critical value thresholds.

EXAM CONTENT OUTLINE

Recognize and take appropriate action on invalid test results, including repeating the test.

Correlate test results with the patient's clinical presentation to assess for concordance.

Task 6: Design a systematic approach to troubleshooting erroneous or unexpected results.

Develop a troubleshooting algorithm that starts with a review of the testing procedure and QC logs.

Assess the integrity of the specimen and the collection process as a potential source of error.

Evaluate environmental factors (e.g., temperature, humidity) that may have impacted the test.

Utilize manufacturer technical support resources to resolve complex instrument or reagent issues.

Determine when it is appropriate to collect a new sample versus repeating the test on the original sample.

Domain 3: Clinical Application and Patient Management (25%)

Task 1: Design and implement treatment plans for infectious diseases based on point-of-care test results under established protocols.

Interpret results for common infectious diseases (e.g., influenza, SARS-CoV-2, Group A Strep, HIV, HCV).

Initiate or modify antimicrobial therapy according to a collaborative practice agreement or standing order.

Recommend appropriate symptomatic care and non-pharmacologic treatments.

Counsel patients on infection control measures to prevent further transmission.

Facilitate referrals for confirmatory testing and linkage to care for diseases like HIV and HCV.

Task 2: Manage chronic disease states using point-of-care test results.

Evaluate results for key chronic disease markers (e.g., A1c, lipids, INR).

Adjust medication therapy for conditions like diabetes, dyslipidemia, and warfarin in accordance with a collaborative practice agreement.

Use test results to assess patient progress and provide motivational feedback.

Identify patients who are not at their therapeutic goal and require intervention.

Communicate results and therapeutic recommendations to the patient's primary care provider.

Task 3: Lead interdisciplinary teams to integrate point-of-care testing into comprehensive patient care workflows.

Collaborate with physicians, nurses, and laboratory staff to design and implement POCT protocols.

Coordinate with licensed prescribers to establish and maintain standing orders and test-to-treat protocols.

Develop communication pathways to ensure test results are integrated into the patient's medical record.

Train other healthcare professionals on their roles and responsibilities within the POCT program.

Lead quality meetings to review program performance with the interdisciplinary team.

Task 4: Develop and manage pharmacist-led "test-to-treat" services.

Design clinical workflows that combine testing, patient assessment, and prescribing in a single encounter.

Evaluate and apply state-specific laws and regulations governing pharmacist prescriptive authority.

Develop collaborative practice agreements or standing orders to authorize test-to-treat services.

Assess patients for contraindications or clinical complexity that would warrant a referral.

Document all components of the test-to-treat encounter, including clinical decision-making.

Task 5: Provide patient-centered and culturally competent counseling based on test results.

Translate complex test results into clear, understandable information for patients.

EXAM CONTENT OUTLINE

Apply health literacy and teach-back principles to confirm patient understanding.

Deliver culturally competent testing and counseling for diverse patient populations.

Address patient questions and concerns with empathy and cultural sensitivity.

Develop and provide written educational materials to supplement verbal counseling.

Task 6: Facilitate appropriate patient referrals based on test results and clinical assessment.

Assess test results and patient presentation to identify findings that require provider follow-up.

Differentiate between results that can be managed under protocol and those that necessitate a referral.

Manage the communication of critical or unexpected results to the patient's primary care provider.

Develop a network of referral partners for patients who do not have an established medical home.

Implement a follow-up process to ensure patients successfully connect with the referred provider.

Domain 4: Practice Management and Business Operations (15%)

Task 1: Design a sustainable business model for a pharmacy-based testing service.

Conduct a needs assessment and market analysis to determine service viability.

Develop a comprehensive business plan, including startup costs, revenue projections, and a break-even analysis.

Evaluate different reimbursement models, including fee-for-service, value-based contracts, and direct-to-consumer pricing.

Design marketing and stakeholder engagement strategies to promote the service to patients, providers, and payers.

Measure and report on key performance indicators (KPIs) to demonstrate the clinical and financial value of the service.

Task 2: Manage the legal and risk management aspects of a testing service.

Assess the state-specific legal framework for pharmacist-led testing and prescribing.

Develop protocols and collaborative practice agreements that comply with all state board of pharmacy regulations.

Evaluate professional liability and other insurance needs for the testing service.

Implement robust policies and procedures to ensure patient privacy and HIPAA compliance.

Design an informed consent process that clearly outlines the scope and limitations of the service.

Task 3: Design and manage the physical workflow and environment for testing.

Select a physical space that ensures patient privacy, safety, and an efficient workflow.

Design a process map that covers the entire patient encounter from check-in to check-out.

Implement procedures to maintain a clean and organized testing environment.

Ensure all necessary equipment and supplies are maintained and easily accessible.

Manage patient flow to minimize wait times and optimize staff efficiency.

Task 4: Design and manage billing and reimbursement strategies for point-of-care testing services.

Implement a workflow for collecting patient demographic and insurance information.

Apply correct CPT and ICD-10 codes for tests and associated clinical services.

Manage the claims submission and adjudication process for both medical and pharmacy benefit payers.

Develop strategies for managing and appealing claim denials.

Navigate emerging reimbursement opportunities, such as value-based payment models for clinical services.

EXAM CONTENT OUTLINE

Task 5: Manage the inventory of test kits, reagents, and supplies.

Design an inventory management system that prevents stockouts and minimizes waste from expired products.

Implement a process for receiving, verifying, and storing shipments according to manufacturer specifications.

Apply a first-in, first-out (FIFO) stock rotation system.

Establish and maintain relationships with vendors and group purchasing organizations.

Conduct periodic inventory counts and reconcile them with purchasing and usage records.

Task 6: Evaluate and select technology solutions for documentation and practice management.

Assess different technology platforms for their ability to support scheduling, documentation, and billing.

Evaluate the interoperability of a potential system with the pharmacy's existing management system and external EHRs.

Ensure any selected technology is fully HIPAA-compliant and has robust security features.

Design the implementation and training plan for a new technology platform.

Use technology to generate data and reports for quality improvement and business analysis.

Domain 5: Digital Health, Public Health, and Emerging Technologies (10%)

Task 1: Integrate point-of-care testing data with electronic health records and other digital platforms.

Evaluate the technical requirements for interfacing a POCT device with an LIS or EMR.

Apply interoperability standards (e.g., HL7) to facilitate the electronic exchange of test results.

Design workflows for the manual or electronic entry of test results into the patient's permanent health record.

Manage the validation and quality assurance of any new digital reporting system or interface.

Troubleshoot common connectivity and data transmission issues.

Task 2: Apply public health principles to pharmacy-based testing services.

Design and implement community-based screening programs to address disparities in access to diagnostics.

Identify notifiable diseases and manage the process for reporting positive results to local and state health departments.

Apply principles of epidemiology to understand disease trends in the community.

Collaborate with public health officials during disease outbreaks to support testing and surveillance efforts.

Serve as a liaison and trusted health resource for the community during public health emergencies.

Task 3: Evaluate emerging diagnostic technologies and their potential for pharmacy practice.

Assess the clinical utility and implementation challenges of new technologies like connected biosensors and at-home diagnostics.

Evaluate the role of artificial intelligence (AI) and machine learning in diagnostic platforms.

Analyze the evolving regulatory landscape for digital health and novel diagnostic tools.

Design pilot programs to test the feasibility of implementing emerging technologies.

Stay current with scientific literature on new and future diagnostic technologies.

Task 4: Implement telepharmacy and remote testing models for point-of-care services.

Design workflows for providing clinical oversight and patient counseling via telehealth platforms.

Evaluate different models for remote sample collection and testing (e.g., home test kits, drive-thru sites).

Apply state-specific regulations governing telepharmacy and remote patient care.

Ensure that remote testing models have robust mechanisms for quality control and patient identification.

Manage the integration of results from remote testing into the patient care record and clinical workflow.

EXAM CONTENT OUTLINE

Task 5: Manage cybersecurity and data privacy in a digital health environment.

Apply HIPAA Security Rule principles to protect electronic patient health information (ePHI).

Assess the cybersecurity risks associated with connected devices and digital health platforms.

Implement policies and procedures to prevent, detect, and respond to data breaches.

Ensure that all technology vendors have appropriate security measures and business associate agreements in place.

Train all staff on best practices for data security, such as strong password management and phishing awareness.

Task 6: Develop community partnerships to expand the reach of testing services.

Collaborate with local employers to design and implement worksite wellness and screening programs.

Partner with community organizations, schools, and faith-based groups to host health fairs and screening events.

Establish referral pathways with public health clinics and other community health providers.

Engage with local media and community leaders to promote public health initiatives.

Design culturally competent outreach strategies to engage diverse and underserved populations.

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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

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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.