Candidate Handbook

CERTIFICATION BOARD OF INFECTION CONTROL AND EPIDEMIOLOGY, INC.

Certification in Infection Prevention and Control

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The Certification Board of Infection Control and Epidemiology, Inc. (CBIC) is a voluntary, autonomous, multidisciplinary board which provides direction for and administers the certification process for infection prevention and control and applied epidemiology. CBIC is independent and separate from any other infection prevention and control-related organization or association. CBIC's certification program is accredited by the National Commission for Certifying Agencies (NCCA). NCCA accreditation signifies that CBIC has met the highest national voluntary standards for private certification. Applied Measurement Professionals, Inc. (AMP), an independent testing agency, provides testing, measurement and processing services to CBIC. CBIC has obtained trademark rights to the CIC® designation.

MISSION STATEMENT

The mission of CBIC is to improve the quality of healthcare by increasing the number of professionals whose knowledge mastery in infection prevention, control and applied epidemiology has been demonstrated by Certification.

This handbook contains information about the infection prevention and control certification process developed by CBIC. It is essential that candidates keep it readily available for reference until they have completed the examination. **Candidates are responsible for knowing its contents.** All previous versions of this handbook are null and void.

Expenses incurred in seeking certification may be tax deductible. Please check with a tax advisor. A receipt for tax purposes will be issued upon request.

STATEMENT OF NONDISCRIMINATION

The test is offered to all eligible persons regardless of age, gender, race, religion, national origin or disability.

How to Contact CBIC

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1 Objectives of Certification

The Certification Board of Infection Control and Epidemiology, Inc. (CBIC) endorses the concept of voluntary, periodic certification for all infection prevention and control professionals meeting educational and practice requirements. The purpose of the certification process is to protect the public by:

1. providing standardized measurement of current essential knowledge needed for persons practicing infection prevention and control;
2. encouraging individual growth and study, thereby promoting professionalism among infection prevention and control professionals; and
3. formally recognizing infection prevention and control professionals who fulfill the requirements for certification and recertification.

2 Definition of Infection Prevention and Control Practice

Definition of Infection Prevention and Control Practice

In order to qualify to sit for the exam, you must:

1. Have primary responsibility for the infection prevention and control program for your employing organization.

or

2. The department in which you work is assigned the responsibility for the infection prevention and control program within the organization.

In addition, your current clinical practice of infection prevention and control must use the knowledge and skills described in the content outline, and must include both the following activities:

1. analysis and interpretation of collected infection prevention data;
2. the investigation and surveillance of suspected outbreaks of infection;

Your current clinical practice must also include at least 3 of the 5 following activities:

3. the planning, implementation and evaluation of infection prevention and control measures;
4. the education of individuals about infection risk, prevention and control;
5. the development and revision of infection prevention and control policies and procedures;
6. the management of infection prevention and control activities;
7. the provision of consultation on infection risk assessment, prevention and control strategies.

3 Eligibility Requirements

Candidates not meeting the education requirement may submit an Eligibility Waiver Application (**see Waiver Process**). All documentation must be provided in English. Any necessary translation will be the candidate's responsibility.

Practice Requirement

Actual current practice in the field of infection prevention and control is required for initial certification. However, there is no minimum time requirement for practice in order to be eligible to take the certification exam. The exam is written for a person who has actively practiced in the field for two years. Considering that, candidates should assess their own level of skills and understanding in deciding when to sit for the exam.

Self-employed individuals may be required to submit documentation of the following should they be selected for a random audit:

1. names of clients,
2. complete addresses of clients,
3. dates of service,
4. types of service, and
5. number of hours of service.

Practice must have included at least five of the seven components of the infection prevention and control activities (**see 2. Definition of Infection Prevention and Control Practice**).

Any candidate who does not provide documentation of requirements will be declared ineligible.

Education Requirement

First-time candidates, candidates who have not successfully passed the examination, and lapsed recertifiers must meet A or B.

A. Have a current license or registration certification as a medical technologist or clinical laboratory scientist, physician or registered nurse,

or

B. Have a minimum of a baccalaureate degree.

Candidates who do not meet the educational requirements may apply for an eligibility waiver (**see Waiver Process**).

Currently certified individuals are automatically eligible to take the examination for recertification.

Qualifications for Infectious Disease Fellows for CIC® Examination

Infectious Disease Fellows may apply upon completion of their fellowship program provided the program included a current rotation in infection prevention and control.

It is the practice of CBIC to conduct random audits of applications submitted by health care professionals who attempt the CIC® Examination. Audited candidates will be required to submit documentation of their professional

license or registration as a medical technologist, physician or registered nurse OR a copy of your baccalaureate (or higher) degree. A verification statement form will be provided to each candidate that will require a director, supervisor, or contractor to complete and sign verifying that the candidate has met the practice requirements.

4 Certification

Infection prevention and control professionals must pass the certification examination to become certified. Certified professionals are entitled to use the designation "CIC®" after their names. Certification in infection prevention and control is valid for five years from the year of successful examination. Persons who do not initially achieve a passing score or whose 90-day eligibility has expired must submit a new application fee and be determined eligible.

Each successful candidate will receive a certificate from CBIC approximately six weeks after they have completed the examination. Replacement certificates can be purchased by sending a written request or download a form to complete from the Web site (***www.cbic.org***), and the required $15 fee to the CBIC Executive Office. Information on the current certification status of an individual will be provided in writing upon request. Annually, a listing of successful candidates will be published and a listing of certified infection prevention and control professionals is maintained on the CBIC Web site (***www.cbic.org***).

5 Recertification

To maintain certification, the infection prevention and control professional must recertify within five calendar years by examination. For example, candidates who take the examination in 2010 must recertify in 2015, 2020, etc.

Changes in federal regulations, accrediting standards, healthcare products, and patient care practices occur frequently. CBIC performs a practice analysis every 4-5 years in order to capture the impact of these changes on the profession. In order to assess the competency of the certificant given these changes, five years was chosen as the certification renewal period.

All currently certified infection prevention and control professionals are eligible for recertification. Certified candidates are eligible to recertify by the Self-Achievement Recertification Examination (SARE) **(see Section 21, About SARE)**.

Candidates who elect not to recertify or who do not successfully recertify will lose their CIC® designation as of December 31st of the year their renewal is due and are prohibited from using the CIC® designation from that day on or until they successfully pass the certification exam.

Certification Examination

6 About the Certification Examination

The infection control certification examination is the only standardized measurement of the basic knowledge, skills and abilities expected of infection prevention and control professionals. It is available in computerized format Monday through Saturday at AMP Assessment Centers throughout the United States and selected international sites.

The certification examination is an objective, multiple-choice examination consisting of 150 questions, administered in computerized format (135 of these questions are used in computing the score, as discussed later in this handbook). The examination content is based upon a practice analysis conducted to ensure the content is current, practice-related and representative of the responsibilities of infection control professionals in the United States and Canada with at least two years of experience.

CBIC is responsible for determining the examination content outline and the examination specifications, maintaining an item bank of approved examination questions, approving the individual examination for administration, and setting the passing score for successful achievement. AMP determines individual eligibility for admission to the examination based on eligibility and admission criteria set by CBIC. AMP is responsible for the computerized testing sites, examination security, examination administration, and the scoring and statistical analysis of the examination.

In addition, CBIC was a Charter member of the National Organization for Competency Assurance (NOCA) now known as the Institute for Credentialing Excellence (ICE). CBIC is accredited by the National Commission for Certifying Agencies (NCCA). NCCA accreditation signifies the highest standards for establishing that a valid, reliable, and secure certification process has been fulfilled.

7 Request for International Test Center

Requests may be made for international test centers. Reservations for these special sites will require an additional test center fee of $35. The CIC® Examination will only be offered in computerized format.

International test centers may be arranged for candidates living outside the United States. Candidates may elect to have the CIC® examination administered by computer at an international AMP Assessment Center. For a complete list of international AMP Assessment Centers please visit AMP's Web site (***www.goAMP.com***). AMP is working

toward continued expansion of the Assessment Center Network and CBIC recommends that you continue to check the available list for additional sites.

8 Applying for the Examination

The CBIC examination is administered by computer at over 170 AMP Assessment Centers geographically distributed throughout the United States and internationally. There are no application deadlines**. Candidates choosing to take an examination at an international location must apply using a paper application.**

U.S. citizens: To apply online follow these steps.

1. Go to ***www.goAMP.com*** and select "Candidates." Select the examination program, submit a completed application and receive confirmation of eligibility online. A candidate's eligibility and acceptance of the application is valid for 90 days.
2. If eligibility is confirmed, proceed to schedule an examination appointment and make payment by credit card. If eligibility is denied, submit requested materials to AMP to confirm eligibility.

To apply using the application included in this handbook or downloaded from ***www.cbic.org***, follow these steps.

1. Complete the paper application and mail it with the appropriate fee to AMP: 18000 W. 105th Street, Olathe, KS 66061-7543. Candidates testing at an international Assessment Center will be required to pay an additional $35 fee.
2. The application is processed, and a confirmation notice of eligibility is sent by mail and e-mail to the candidate within approximately two weeks. If a confirmation notice is not received within three weeks, contact the AMP Examination Services Department at 913/895-4600. A candidate's eligibility and acceptance of the application is valid for 90 days.

   A candidate who fails to schedule an appointment for examination within the 90-day eligibility period must submit a complete application and examination fee to reschedule an examination appointment.
3. The confirmation notice contains a web address and toll-free telephone number for the candidate to contact AMP. Appointments can also be scheduled online 24 hours a day, seven days a week at ***www.goAMP.com***. The toll-free line is answered from 7:00 a.m. to 9:00 p.m. (Central Time) Monday through Thursday, 7:00 a.m. to 7:00 p.m. on Friday, and 8:30 a.m. to 5:00 p.m. on Saturday.

   The candidate must be prepared to confirm a date and location for testing and to provide her/his Social Security number as a unique identification number. The examinations are administered by appointment only Monday through Saturday at 9:00 a.m. and 1:30 p.m. Individuals are scheduled on a first-come, first-serve basis. Refer to the chart below.

If the candidate contacts AMP by 3:00 p.m. Central Time on . . .	Depending upon availability, an examination may be scheduled beginning . . .
Monday	Wednesday
Tuesday	Thursday
Wednesday	Friday/Saturday
Thursday	Monday
Friday	Tuesday

4. The candidate must contact AMP to schedule an appointment. When a candidate contacts AMP to schedule their examination appointment, they will be notified of the time to report to the Assessment Center and if an e-mail address is provided they will be sent an e-mail confirmation notice. **Candidates who arrive at the Assessment Center later than 15 minutes from the scheduled appointment time will not be admitted. Unscheduled candidates (walk-ins) will not be admitted to the Assessment Center.**

   CBIC reserves the right to verify information supplied by the candidate via a random audit. An application is considered complete only if all requested information is complete and accurate; if the candidate is eligible for the examination; and if fees are submitted. Examination fees for ineligible applications will be refunded minus a $70 processing fee.

   Note: Examinations will not be offered on the following U.S. holidays.

   New Year's Day
   Martin Luther King Day
   Presidents' Day
   Good Friday
   Memorial Day
   Independence Day (July 4)
   Labor Day
   Columbus Day
   Veterans' Day
   Thanksgiving Day (and the following Friday)
   Christmas Eve Day
   Christmas Day
   New Year's Eve Day

9 Assessment Center Locations

Many of the AMP Assessment Centers are located in H&R Block offices. Detailed maps and directions are available via AMP's Web site (***www.goAMP.com***). Specific address information will be provided when a candidate schedules an examination appointment. For a listing of international testing center locations, please visit AMP's Web site.

10 Appointment Changes

1. A candidate may reschedule **ONE** appointment for the examination at no charge by calling AMP at 888/519-9901 at least two business days prior to the scheduled examination session. (See table below.)

If the examination is scheduled on . . .	The candidate must call AMP by 3:00 p.m. Central Time to change his/her reservation by the previous…
Monday	Wednesday
Tuesday	Thursday
Wednesday	Friday
Thursday	Monday
Friday	Tuesday

2. A candidate who wishes to reschedule an examination but fails to contact AMP at least two business days prior to the scheduled examination session forfeits the application and all fees paid to take the examination. A complete application and examination fee are required to reapply for examination.
3. A candidate who cancels his/her examination after confirmation of eligibility forfeits the application and all fees paid to take the examination. A complete application and examination fee are required to reapply for examination.

Taking the Examination

The examination will be given by computer at an AMP Assessment Center. Candidates do not need any computer experience or typing skills to take the examination. On the day of the examination, report to the Assessment Center no later than the scheduled examination time. Look for signs indicating AMP Assessment Center Check-in. A CANDIDATE WHO ARRIVES MORE THAN 15 MINUTES AFTER THE SCHEDULED EXAMINATION TIME WILL NOT BE ADMITTED.

11 Identification

To gain admission to the Assessment Center, a candidate must present two forms of identification, one with a current photograph. Both forms of identification must be current and include the candidate's current name and signature. The candidate will be required to sign a roster for verification of identity.

Acceptable forms of photo identification include a current driver's license with photograph, a current state identification card with photograph, a current passport, or a current military identification card with photograph. Employment ID cards, student ID cards and any type of temporary identification are NOT acceptable as the primary form of identification.

CANDIDATES MUST HAVE PROPER IDENTIFICATION TO GAIN ADMISSION TO THE ASSESSMENT CENTER. Failure to provide appropriate identification at the time of the examination is considered a missed appointment. There will be no refund of the examination fee.

Rules for the Examination

12 Security

AMP administration and security standards are designed to ensure all candidates are provided the same opportunity to demonstrate their abilities. The Assessment Center is continuously monitored by audio and video surveillance equipment for security purposes.

The following security procedures apply during the examination:

- Examinations are proprietary. No cameras, notes, tape recorders, Personal Digital Assistants (PDAs), pagers or cellular phones are allowed in the testing room. Possession of a cellular phone or other electronic devices is strictly prohibited and will result in dismissal from the examination.
- Only silent, non-programmable calculators without alpha keys or printing capabilities are allowed in the testing room.
- No guests, visitors or family members are allowed in the testing room or reception areas.

13 Personal Belongings

No personal items, valuables, or weapons should be brought to the Assessment Center. Only wallets and keys are permitted. Coats must be left outside the testing room. You will be provided a soft locker to store your wallet and/or keys with you in the testing room. You will not have access to these items until after the examination is completed. Please note the following items will not be allowed in the testing room except securely locked in the soft locker.

- watches
- hats
- cell phones or personal communication devices

Once you have placed everything into the soft locker, you will be asked to pull your pockets out to ensure they are empty. If all personal items will not fit in the soft locker you will not be able to test. The site will not store any personal belongings.

If any personal items are observed in the testing room after the examination is started, the administration will be forfeited.

14 Examination Restrictions

- Pencils will be provided during check-in.
- You will be provided with one piece of scratch paper at a time to use during the examination, unless noted on the sign-in roster for a particular candidate. You must return the scratch paper to the supervisor at the completion of testing, or you will not receive your score report.
- No documents or notes of any kind may be removed from the Assessment Center.
- No questions concerning the content of the examination may be asked during the examination.
- Eating, drinking or smoking will not be permitted in the Assessment Center.
- You may take a break whenever you wish, but you will not be allowed additional time to make up for time lost during breaks.

15 Misconduct

If you engage in any of the following conduct during the examination you may be dismissed, your scores will not be reported and examination fees will not be refunded. Examples of misconduct are when you:

- create a disturbance, are abusive, or otherwise uncooperative;
- display and/or use electronic communications equipment such as pagers, cellular phones, PDAs;
- talk or participate in conversation with other examination candidates;
- give or receive help or is suspected of doing so;
- leave the Assessment Center during the administration;
- attempt to record examination questions or make notes;
- attempt to take the examination for someone else;
- are observed with personal belongings, or
- are observed with notes, books or other aids without it being noted on the roster.

16 Copyrighted Examination Questions

All examination questions are the copyrighted property of CBIC. It is forbidden under federal copyright law to copy, reproduce, record, distribute or display these examination questions by any means, in whole or in part. Doing so may subject the candidate to severe civil and criminal penalties.

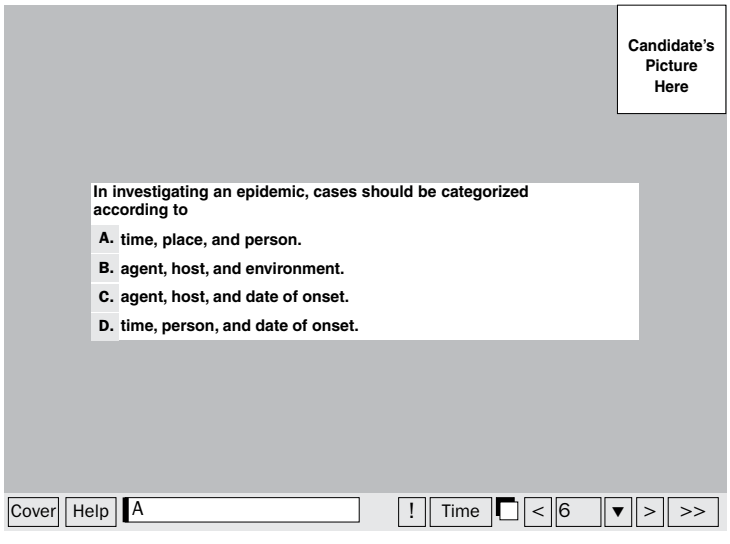
17 Practice Examination Session

After the candidate's identification has been confirmed, he/she will be directed to a testing carrel. He/she will be instructed on-screen to enter his/her Social Security number. He/she will be instructed on how to take his/her photograph which will remain on screen throughout the examination session. This photograph will also print on the score report.

Prior to attempting the examination, the candidate will be given the opportunity to practice taking an examination on the computer to familiarize themselves with the testing software. The time used for this practice examination is NOT counted as part of the examination time or score. When the candidate is comfortable with the computer testing process, he/she may quit the practice session and begin the timed examination.

18 Timed Examination

Following the practice examination, the actual examination will begin. Before beginning, instructions for taking the examination are provided on-screen.



The computer monitors the time spent on the examination. The candidate will have 3 hours to complete the examination. The examination will terminate if testing exceeds the time allowed. Click on the "Time" box in the

lower right portion of the screen or select the Time key to monitor testing time. A digital clock indicates the time remaining to complete the examination. The Time feature may be turned off during the examination.

Only one examination question is presented at a time. The question number appears in the lower right portion of the screen. Choices of answers to the examination questions are identified as A, B, C, or D. The candidate must indicate his/her choice by either typing in the letter in the response box in the lower left portion of the computer screen or clicking on the option using the mouse. To change an answer, enter a different option by pressing the A, B, C, or D key or by clicking on the option using the mouse. The candidate may change his/her answer as many times as he/she wishes during the examination time limit.

To move to the next question, click on the forward arrow (>) in the lower right portion of the screen or select the NEXT key. This action will move the candidate forward through the examination question by question. To review any question, click the backward arrow (<) or use the left arrow key to move backward through the examination.

An examination question may be left unanswered for return later in the examination session. Questions may also be bookmarked for later review by using the mouse and clicking in the blank square to the right of the Time button. Click on the hand icon or select the NEXT key to advance to the next unanswered or bookmarked question on the examination. To identify all unanswered and bookmarked questions, repeatedly click on the hand icon or press the NEXT key. When the examination is completed, the number of examination questions answered is reported. If not all questions have been answered and there is time remaining, return to the examination and answer those questions. Be sure to provide an answer for each examination question before ending the examination. There is no penalty for guessing.

19 Candidate Comments

During the examination, comments may be provided for any question by clicking on the button displaying an exclamation point (!) to the left of the Time button. This opens a dialogue box where comments may be entered. Candidates will not be provided additional time to submit comments. Comments will be reviewed, but individual responses will not be provided.

Following the Examination

After completing the examination, candidates are asked to complete a short evaluation of their testing experience. Then, they are instructed to report to the examination proctor to receive their score report. AMP will mail score reports within 3-5 business days for candidates who test at an international Assessment Center. Scores are reported in written form only, in person or by U.S. mail. Scores are not reported over the telephone, by electronic mail or by facsimile.

20 Score Report

The score report will indicate a “pass” or “fail.” Additional detail is provided in the form of raw scores by major content category. A raw score is the number of questions answered correctly. Pass/fail status is determined by the raw score. Even though the examination consists of 150 questions, the candidates score is based on 135 questions. Fifteen questions are “pretest” questions.

The methodology used to set the minimum passing score is the Angoff method, applied during the performance of a Passing Point Study by a panel of experts in the field. The experts evaluated each question on the examination to determine how many correct answers are necessary to demonstrate the knowledge and skills required to pass this examination portion. Your ability to pass the examination depends on the knowledge and skill you display, not on the performance of other candidates.

Passing scores may vary slightly for each version of the examination. To ensure fairness to all candidates, a process of statistical equating is used. This involves selecting an appropriate mix of individual questions for each version of the examination that meet the content distribution requirements of the examination content blueprint. Because each question has been pretested, a difficulty level can be assigned. The process then considers the difficulty level of each question selected for each version of the examination, attempting to match the difficulty level of each version as closely as possible. To assure fairness, slight variations in difficulty level are addressed by adjusting the passing score up or down, depending on the overall difficulty level statistics for the group of scored questions that appear on a particular version of the examination.

Details of examination questions answered incorrectly will not be provided to the candidate. This practice is in accordance with best practices in the field of professional accrediting.

Self-Achievement Recertification Examination (SARE)

The CBIC Self-Achievement Recertification Examination (SARE) is offered online in a web-based format. The CBIC Board of Directors changed the format of the SARE from paper/pencil to web-based format to provide a more up-to-date testing experience to those wishing to renew their CIC® credential via the SARE. An added benefit of the web-based testing format is that score reports will be available at the conclusion of the testing session.

21 About the SARE

The SARE is a 150-question, multiple-choice, web-based examination designed to assess the knowledge of professionals in infection prevention and control and epidemiology. SARE questions are not identical to any in the active pool of questions used on the certification examination, but were developed or redesigned by the CBIC Test Committee specifically for the purposes of the SARE. Like the certification examinations, SARE questions are based on the most current CBIC practice analysis, and the content outline is identical to the other examinations. The questions developed are held to the same standards and analysis as the other examinations. However, the SARE is geared toward the advanced infection prevention and control recertifier (who is, at minimum, a seven-year practitioner), so some questions may be more difficult than those on the certification examination, which is geared toward a two-year practitioner.

The purpose/goal of the SARE is to demonstrate continued knowledge mastery in the field of infection prevention and control.

The six objectives for the 2009-2010 SARE are as follows:

1. Identify infectious disease processes
2. Describe the components of an effective surveillance system
3. Discuss the processes used in preventing/controlling the transmission of infectious agents
4. Describe the components required for managing an Infection Control Program
5. Describe the methods used to develop education and research projects
6. Identify Infection Control aspects of employee health

At the completion of the test, you will be asked to rate your achievement of these objectives.

Within four weeks of receipt of a request for the SARE, the candidate will receive a confirmation e-mail with specific instructions on how to logon to the SARE. The e-mail will include a unique ID and password that must be used during the login process. Candidates will be able to login and out as many times as necessary, within the established testing window, to complete the examination; responses provided during previous log ins will be saved. Candidate results will be provided online and will also be sent to the candidate's e-mail address.

Directions and explanations for any SARE exam will no longer be developed and will not be included with the pass/fail score report. Details of examination questions answered incorrectly will not be provided to the candidate.

If a candidate fails the SARE, there will no longer be a 1-year extension to re-test. The candidate's certification will expire December 31st of the testing year.

Both changes are in accordance with best practices in the field of professional credentialing. CBIC will not be developing directions and explanations booklets for any future version of the SARE.

Candidates may NOT use the SARE for recertification if they did not achieve a passing score on the SARE anytime in the past five years that they were certified.

To be considered for recertification, the SARE must be **completed by December 31** of the recertifying year. If candidate fails to complete the SARE by the December 31 deadline, your fee will be forfeited and the candidate will be required to pay additional fees and apply for recertification through the computerized examination. An order form is provided on page 17 of this handbook.

For more information regarding the SARE, contact the CBIC Executive Office, 555 East Wells Street, Suite 1100, Milwaukee, WI 53202-3823, by telephone at 414/918-9796, or e-mail to *info@cbic.org*.

22 Application Procedure for Recertification by SARE

Candidates recertifying by SARE must complete the SARE order form on page 17 of this handbook. SAREs must be ordered in the same calendar year the candidate is due for recertification. SARE orders will be filled within four weeks.

The deadline to purchase the SARE is December 1.

The web-based SARE must be completed by **December 31** of the recertifying year. Candidates should allow themselves ample time to complete the SARE, researching information as needed.

SARE Non-Refund Policy

There is a nonrefundable fee for each SARE purchased.

General Information

23 Preparation for the Infection Prevention and Control Certification Examination

The only study material sponsored by CBIC is the online Practice Examination available through the CBIC Web site at ***www.cbic.org***. The online Practice Examination is a 70-question web-based test that follows the current content outline. The online Practice Examination allows purchasers to familiarize themselves with the testing software and provides scores and feedback by major content area.

The expanded examination content outline included on pages 19-21 is best used for course and curriculum preparation and to judge the relevance of topics to the content of the examination; it is not necessarily a useful study tool.

A list of suggested study and reference materials can be found on the CBIC Web site (***www.cbic.org***).

24 Examination Fees

Candidates must submit the appropriate fee with a complete examination application. Payment in U.S. dollars may be made by personal check, cashier's check, money order or credit card.

A candidate approved to take the examination who 1) does not schedule an examination within the 90-day eligibility period, 2) fails to reschedule an examination within two business days of the scheduled testing session, 3) fails to report for an examination appointment, 4) arrives more than 15 minutes late for an appointment, or 5) fails to present appropriate identification on the day of the examination, will forfeit their examination fee. Such candidates may reapply by submitting a new application and full examination fee. Candidates who must retake the examination must reapply for the examination by submitting a new application and full examination fee.

Candidates who previously have been certified and whose certification has expired, or the certificant was not recertified for any reason, must pay the examination fee of a First-Time Certifier and must meet the current eligibility requirements.

25 Candidates Who Pass the Examination

Candidates who pass the CBIC examination are allowed to use the designation "CIC®" after their name. CBIC reserves the right to recognize publicly any candidate who has successfully completed a CBIC certification examination, thereby earning the certification credential. Recognition will be awarded so as not to embarrass any candidate who is unsuccessful in an attempt to achieve certification.

26 Candidates Who Do Not Pass the Examination

Candidates who do not pass the examination, or the SARE, will need to submit a new application and full examination fee. Please review rules of eligibility before submitting a new application and fee. **An individual may take the CBIC examination a maximum of four times per year or once every 90 days.**

Candidates can NOT use the SARE for recertification if they did not achieve a passing score on the SARE anytime in the past five years that they were certified.

27 Scores Cancelled by CBIC or AMP

CBIC and AMP are responsible for the integrity of the scores they report. On occasion, occurrences, such as computer malfunction or misconduct by a candidate, may cause a score to be suspect. CBIC and AMP are committed to rectifying such discrepancies as expeditiously as possible. CBIC may void examination results if, upon investigation, violation of its regulations is discovered.

28 Duplicate Score Report

Candidates may purchase additional copies of their score reports at a cost of $25 per copy. Requests must be submitted to AMP, in writing, within 12 months after the examination. The request must include the candidate's name, Social Security number, mailing address, telephone number, date of examination and examination taken. Submit the completed form (page 13) with the required fee payable to AMP. Duplicate score reports will be mailed within five business days after receipt of the request.

29 Requests for Handscoring

Because the computer instantly records the response provided by the candidate, handscoring is not relevant.

30 Lapsed Certification

If certification expires, candidates will be assessed first-time applicant fees. Previously certified candidates are eligible for recertification by submission of application and fees. Documents requested for applicants must be submitted to support degree/license/registration and must include a verification statement from the employer verifying infection control practice experience.

Recertifier's unsuccessful in passing the examination see **5. Recertification.**

31 Revocation of Certification

Certified professionals or persons wrongfully using the "CIC®" designation are subject to disciplinary action as defined in CBIC's Judicial and Ethics Policy and Procedures for the following types of actions: falsification of an application, violation of examination procedures or misrepresentation of the certification status. A copy of the Judicial and Ethics Policy and Procedures can be obtained by writing:

CBIC Executive Office
555 East Wells Street
Suite 1100
Milwaukee, WI 53202-3823
info@cbic.org *www.cbic.org*

32 Waiver Process

Candidates who do not meet the education requirements for the certification examination but feel they should be allowed to take it, may write to the CBIC Executive Office at the address listed below to obtain an application form to waive the education requirements. There is a nonrefundable processing charge of $30, which should accompany the waiver application, payable to CBIC. **Practice requirements cannot be waived. Do NOT send examination application or fees.**

Applicants will be notified of the decision of the CBIC review coordinator approximately four to six weeks after receipt of all required materials.

CBIC Executive Office
555 East Wells Street
Suite 1100
Milwaukee, WI 53202-3823
info@cbic.org *www.cbic.org*

33 Special Arrangements for Candidates with Disabilities

AMP complies with the Americans with Disabilities Act and strives to ensure that no individual with a disability is deprived of the opportunity to take the examination solely by reason of that disability. AMP will provide reasonable accommodations for candidates with disabilities.

Wheelchair access is available at all established Assessment Centers. Candidates with visual, sensory or physical disabilities that would prevent them from taking the examination under standard conditions may request special accommodations and arrangements. To request special accommodations, complete the Request for Special Examination Accommodations form on page 15 and **include it with the completed application and appropriate examination fee** at least 45 calendar days prior to the desired examination date. Please inform AMP of the need for special accommodations when scheduling an examination time.

CBIC
CERTIFICATION BOARD OF INFECTION CONTROL AND EPIDEMIOLOGY, INC.

Examination Application

Incomplete applications will not be processed and will be returned to the candidate.

PRINT NAME

Last: First: MI:

PREFERRED MAILING ADDRESS

Street/P.O. Box:

DATE OF BIRTH

Mo:___ ___ Day:___ ___ Yr:___ ___

City: State/Province: Country: Zip/Postal Code:

Daytime Telephone No.: ( )

Evening Telephone No.: ( )

Fax No.: ( )

E-mail:

Actual current practice in the field of infection prevention and control is required for initial certification. However, there is no minimum time requirement for practice in order to be eligible to take the certification exam. The exam is written for a person who has actively practiced in the field for two years. Considering that, candidates should assess their own level of skills and understanding in deciding when to sit for the examination.

Practice Requirement

In order to qualify to sit for the exam, you must:

☐ Have primary responsibility for the infection prevention and control program for your employing organization.

or

☐ The department in which you work is assigned the responsibility for the infection prevention and control program within the organization

In addition, your current clinical practice of infection prevention and control must use the knowledge and skills described in the content outline, and **must** include both the following activities:

☐ The analysis and interpretation of collected infection prevention data;

☐ The investigation and surveillance of suspected outbreaks of infection;

Your current clinical practice **must** include at least 3 of the 5 following activities:

☐ The planning, implementation and evaluation of infection prevention and control measures;

☐ The education of individuals about infection risk, prevention and control;

☐ The development and revision of infection control policies and procedures;

☐ The management of infection prevention and control activities;

☐ The provision of consultation on infection risk assessment, prevention and control strategies.

☐ **Self-Employed**
For initial certification, self-employed individuals must meet the same current practice requirements shown above.

Education Requirement

Candidates for initial certification must meet education requirement A or B.

☐ A. Have a current license or registration certification as a medical technologist or clinical laboratory scientist, physician or registered nurse,

or

☐ B. Have a minimum of a baccalaureate degree.

☐ **Infectious Disease Fellows**
For initial certification, Infective Disease Fellows must have completed a fellowship program that included a current rotation in infection prevention and control.

Because of functional limitations imposed by a disability, special arrangements will be necessary for the candidate to complete the certification examination. ☐ Yes ☐ No

If yes, please complete and submit the form on pages 15 and 16 explaining arrangements needed and provide written verification of disability.

Certification status for which the candidate is eligible:

☐ certification ☐ recertification

Have you previously taken the CBIC examination? ☐ Yes ☐ No

If yes, on what date was the examination last taken: _____

Have you previously been certified in infection control? ☐ Yes ☐ No

If yes, most recent date: _____

Assessment Center Location:

☐ United States Assessment Center

☐ International Assessment Center

Please indicate examination and fee:

☐ First-Time Certifiers
(first-time certifiers or lapsed certifiers) $310

☐ First-Time Reapplicant
(valid one time if reapplicant reapplies within 90 days of their first attempt) $260

☐ Recertifying Candidates by CBT
(recertifying within five-year cycle) $275

☐ International Assessment Center
(include an additional) $35

If payment is made by check or money order, submit it with this application.

If payment is made by credit card, provide the following:

☐ VISA ☐ MasterCard ☐ American Express ☐ Discover

I agree to pay above amount according to card issuer agreement.

Credit Card No.: _____

Exp. Date: _____

Signature: _____

Make **CHECK or MONEY ORDER** payable in U.S. dollars drawn on a U.S. bank to "AMP."

OVER ☞

Education level (check highest level):

- ☐ Diploma in nursing
- ☐ Associate degree in nursing
- ☐ Bachelor's degree in nursing or microbiology/medical technology
- ☐ Master's degree in nursing or microbiology/medical technology
- ☐ Doctorate in medicine
- ☐ Doctorate in nursing or microbiology
- ☐ Other (specify)_____

Professional license or registration/certification (check only one):

- ☐ Medical technologist
- ☐ Physician
- ☐ Registered Nurse
- ☐ Other (specify)_____
- ☐ None

Years of experience/practice in infection control (check only one):

- ☐ 0 - 1 year
- ☐ 2 - 3 years
- ☐ 3 - 5 years
- ☐ more than 5 years but fewer than 10
- ☐ 10 or more years

AGREEMENT OF AUTHORIZATION & CONFIDENTIALITY

I have read the current Practice Requirement and Educational Requirement and attest that I meet these requirements.

I understand that I could be audited to verify my eligibility. I understand my certification can be delayed until eligibility is verified.

I authorize the Certification Board of Infection Control and Epidemiology, Inc. to make whatever inquiries and investigations that it deems necessary to verify my credentials and professional standing. I allow the Certification Board of Infection Control and Epidemiology, Inc. to use information from my application and subsequent examination for the purpose of statistical analysis, provided my personal identification with that information has been deleted.

I have read and understand the information provided in the candidate handbook. I declare that the foregoing statements are true. I understand that false information may be cause for denial or loss of the credential. I understand that I can be disqualified from taking or completing the examination, or from receiving examination scores, if the Certification Board of Infection Control and Epidemiology, Inc. determines that I was engaged in collaborative, disruptive or other prohibited behavior during the administration of the examination.

I further agree to abide by the policies and procedures as set forth in this candidate handbook.

_____ _____

Candidate's Signature Date

RETURN THIS APPLICATION AND APPROPRIATE DOCUMENTS AND FEES TO:

Examination Services
AMP
18000 W. 105th Street
Olathe, KS 66061-7543
913/895-4600

Duplicate CBIC Score Report Request

Directions: A candidate may use this form to request AMP to send them a duplicate copy of his/her score report. Please print or type all information below and include correct fees, or the request will be returned.

Fee: $25 per copy. Please enclose **check or money order** made payable in U.S. dollars to AMP. Do not send cash.

Send to: Examination Services
AMP
18000 W. 105th Street
Olathe, KS 66061-7543

AMOUNT ENCLOSED: $_____

Print candidate's current name and address.

Name_____ Candidate ID_____

Street _____

City_____ State/Prov._____ Zip/Postal Code_____

Telephone (_____)_____ Fax (_____)_____ E-mail _____

Examination Date_____ **Examination Site**_____

I hereby request AMP to send a duplicate of my score report to the address above.

_____ _____
Candidate's Signature Date

Request for Special Examination Accommodations

Please complete this form and the "Documentation of Disability-Related Needs" on the reverse side so the accommodation for testing can be processed efficiently. The information provided and any documentation regarding the candidate's disability and need for accommodation in testing will be considered strictly confidential and will not be shared with any outside source without the candidate's express written consent. Candidates who have existing documentation of the same or similar accommodation(s) provided for them in another examination situation, may submit such documentation instead of having the reverse side of the form completed by an appropriate professional.

Applicant Information

Requested Examination Site _____

_____
Last Name First Name Middle Name

_____
Address

_____
City State Zip Code

_____
Daytime Phone Number Fax E-mail

Special Accommodations

I request special accommodations for the _____ / _____ administration of the CBIC examination.
Month Year

Please provide (check all that apply):

_____ Reader
_____ Extended testing time (normally 1.5 additional hours)
_____ Reduced distraction environment
_____ Please specify below if other special accommodations are needed.

_____
_____
_____

Comments:_____
_____
_____

Signed: _____ **Date:**_____

Return this form with the examination application to:
Examination Services, AMP, 18000 W. 105th Street, Olathe, KS 66061-7543.
If you have questions, call 913/895-4600.

Documentation of Disability-Related Needs

Candidates who have a learning disability, a psychological disability, or other disability that requires an accommodation in testing, please have this section completed by an appropriate professional (education professional, doctor, psychologist, psychiatrist) to certify that the candidate's disabling condition requires the requested test accommodation. Candidates who have existing documentation of the same or similar accommodation provided for them in another examination situation, may submit such documentation instead of completing the "Professional Documentation" portion of this form.

Professional Documentation

I have known _____ since _____ / _____ / _____ in my capacity as a
Candidate's Name Date

_____.
Professional Title

The applicant discussed with me the nature of the test to be administered. It is my opinion that because of this applicant's disability described below, he/she should be accommodated by providing the special arrangements listed on the reverse side.

Description of Disability: _____

_____

_____

_____

_____

Signed: _____ **Title:** _____

Printed Name: _____

Address: _____

_____

Telephone Number: _____

Date: _____ **License # (if applicable):** _____

Return this form with the examination application to:
Examination Services, AMP, 18000 W. 105th Street, Olathe, KS 66061-7543.
If you have questions, call 913/895-4600.

SARE Order Form – Self-Achievement Recertification Examination

To order a SARE, complete the form below and submit it with the fee to the CBIC Executive Office, 555 East Wells Street, Suite 1100, Milwaukee, WI 53202-3823.

For Recertification: The SARE for recertification is an alternative to the examination that may be taken by the recertifying practitioner at his/her recertifying interval. To be considered for recertification, the SARE must be completed by December 31 of the recertifying year.

Fee: $340 in U.S. funds

The deadline to purchase the SARE is December 1.

*Those wishing to sit for the proctored computer-based (PCBT) examination may still continue to do so at their regular recertifying interval (**See 24. Examination Fees**). Use the application on page 11 of this handbook.*

Please send me the link of the CBIC Self-Achievement Recertification Examination (SARE) to the following e-mail address (required). I have enclosed payment in U.S. funds for the fee listed below.

Name_____ Certification # _____

Street _____

City_____ State/Prov._____ Zip/Postal Code_____

Telephone (_____)_____ Fax (_____) _____

E-mail (required for web-based SARE) _____

Fee selection: ☐ $340 – Recertification

Method of Payment: ☐ Check payable to CBIC* ☐ VISA** ☐ MasterCard** ☐ American Express** ☐ Discover**

Account Number_____ Expiration Date_____

Cardholder's Name (please print)_____ Signature _____

** A charge of $20 will apply to checks returned for insufficient funds.*

*** If rebilling of a credit card charge is necessary, a $25 processing fee will be charged.*

Please provide the following information:

Education level: *(choose highest level)* ___ ___

(01) Diploma in nursing
(02) Associate degree in nursing
(03) Bachelor's degree in nursing or microbiology/medical technology
(04) Master's degree in nursing or microbiology/medical technology
(05) Doctorate in medicine
(06) Doctorate in nursing or microbiology
(07) Other (specify)_____

Professional license or registration/certification: *(choose only one)* ___ ___

(01) Medical technologist – MT(ASCP)
(02) Physician
(03) Registered Nurse
(05) Other (specify)_____
(06) None

Years of experience/practice in infection control: *(choose only one)* ___ ___

(04) more than 5 years but fewer than 10
(05) 10 or more years

Return this form with payment to:

CBIC Executive Office
555 East Wells Street
Suite 1100
Milwaukee, WI 53202-3823
Fax: 414/276-3349

Within four weeks of receipt of an order for the SARE, the candidate will receive a confirmation e-mail with specific instructions on how to logon to the SARE. The e-mail will include a unique ID and password that must be used during the login process. Candidates will be able to login and out as many times as necessary, within the established testing window, to complete the examination; responses provided during previous logins will be saved. Candidate results will be provided online and will also be sent to the candidate's e-mail address. SARE must be completed by December 31. Access to the web-based SARE will be denied after December 31.

2011 Examination Content Outline

The current infection control certification examination is based on a content outline developed from a practice analysis completed in 2010. The content outline is presented here in its entirety. The number of examination questions on the examination from each content area is provided by each major (1 - 6) content heading.

In addition to the 135 items (questions) used to compute candidates' scores, all examination forms will include 15 unscored pretest items, interspersed throughout the examination. All items are also classified by the cognitive level that is expected of the candidates. Among the 135 scored items, approximately 25 percent require recall of information, 60 percent require application of knowledge, and 15 percent require analysis of a situation.

1. Identification of Infectious Disease Processes (18)

A. Differentiate among colonization, infection, and contamination

B. Identify occurrences, reservoirs, incubation periods, periods of communicability, modes of transmission, signs and symptoms, and susceptibility associated with the disease process

C. Interpret results of diagnostic/laboratory reports

D. Recognize limitations and advantages of types of tests used to diagnose infectious processes

E. Recognize epidemiologically significant organisms for immediate review and investigation

F. Differentiate among prophylactic, empiric, and therapeutic uses of antimicrobials

G. Identify indications for environmental microbiologic monitoring

2. Surveillance and Epidemiologic Investigation (38)

A. Design of Surveillance Systems

1. Develop a surveillance plan based on the population served, services provided, and regulatory or other requirements
2. Evaluate periodically the effectiveness of the surveillance plan and modify as necessary
3. Identify appropriate critical/significant lab results and implement a notification system
4. Determine data needed to calculate specific rates
5. Integrate surveillance activities within health care settings (e.g., ambulatory, home health, long term care, acute care)
6. Establish mechanisms for identifying those with communicable diseases requiring follow-up and/or isolation

B. Collection and Compilation of Surveillance Data

1. Use standardized definitions for the identification of outcomes and processes
2. Use a systematic approach to record surveillance data
3. Determine numerators, denominators, and constants for calculations of rates for outcomes and processes
4. Organize and manage data in preparation for analysis
5. Determine the incidence or prevalence of infections
6. Calculate specific infection rates (e.g., provider-specific, unit-specific, device-specific, procedure-specific)
7. Calculate risk stratified rates
8. Incorporate post-discharge surveillance findings into calculation of rates

C. Interpretation of Surveillance Data

1. Generate, analyze, and validate surveillance data
2. Use basic statistical techniques to describe data (e.g., mean, standard deviation, rates, ratios, proportions)
3. Recognize statistical significance of surveillance data
4. Monitor and interpret antibiotic resistance patterns
5. Recognize the need for an epidemiologic study to investigate a problem (e.g., case control, cohort studies)
6. Compare surveillance results to published data or other benchmarks
7. Prepare and report findings of surveillance or epidemiologic investigation to customers, using analyzed data, tables, graphs, or charts, as appropriate
8. Develop and implement corrective action plans based on surveillance findings

D. Outbreak Investigation

1. Verify existence of outbreak
2. Collaborate with appropriate persons to establish the case definition, period of investigation, and case-finding methods
3. Define the problem using time, place, person, and risk factors
4. Formulate hypothesis on source and mode of transmission
5. Implement and evaluate control measures, including ongoing surveillance
6. Prepare and disseminate reports

3. **Preventing/Controlling the Transmission of Infectious Agents (39)**
   A. Develop and review infection prevention and control policies and procedures
   B. Collaborate with public health agencies in planning community responses to biological agents (e.g., anthrax, influenza)
   C. Identify and implement infection prevention and control strategies related to:
      1. Hand hygiene
      2. Cleaning, disinfection, and sterilization
      3. Specific direct and indirect care settings (e.g., patient care units, operating room, ambulatory care center, respiratory therapy)
      4. Infection risks associated with therapeutic and diagnostic procedures and devices (e.g., dialysis, angiography, bronchoscopy, endoscopy, intravascular devices, urinary drainage catheter)
      5. Recall of potentially contaminated equipment and supplies
      6. Initiation and discontinuation of isolation/barrier precautions when indicated
      7. Patient placement, transfer, and discharge
      8. Environmental hazards
      9. Use of patient care products and medical equipment
      10. Immunization programs for patients
      11. Construction and renovation in patient care settings
      12. The influx of patients with communicable diseases (e.g., bioterrorism, emerging infectious diseases)

4. **Employee/Occupational Health (10)**
   A. Review and/or develop screening and immunization programs
   B. Provide counseling, follow up, work restriction recommendations related to communicable diseases or following exposures
   C. Assist with analysis and trending of occupational exposure incidents and information exchange between Occupational Health and Infection Prevention and Control departments
   D. Assess risk of occupational exposure to infectious diseases (e.g., TB, bloodborne pathogens)

5. **Management and Communication (Leadership) (16)**
   A. Planning
      1. Conduct an infection risk assessment of the organization
      2. Develop, evaluate, and revise a mission and vision statement, goals, measurable objectives, and action plans for the Infection Prevention and Control Program
      3. Recommend specific equipment, personnel, and resources for the Infection Prevention and Control Program
      4. Participate in cost benefit assessments, efficacy studies, and product evaluations
      5. Recommend changes in practice based on clinical outcomes and financial implications
   B. Communication and Feedback
      1. Provide infection prevention and control findings, recommendations, annual reports, and policies and procedures to appropriate individuals, committees, departments, and units
      2. Communicate with internal and external customers (e.g., related to Infection Prevention and Control issues of continuity of care, reporting communicable diseases)
      3. Collaborate with Risk Management/Quality Management in the identification and review of adverse and sentinel events
      4. Evaluate accreditation/regulatory issues and facilitate compliance
   C. Quality/Performance Improvement and Patient Safety
      1. Participate in quality/performance improvement and patient safety activities related to infection prevention and control
      2. Demonstrate quality/performance improvement projects through the use of graphic tools (e.g., "fishbone" diagram, Pareto charts, flow charts)

6. **Education and Research (14)**
   A. Education
      1. Assess needs, develop goals and measurable objectives, and prepare lesson plans for educational offerings
      2. Apply principles of adult learning to educational strategies and delivery of educational sessions
      3. Prepare, present, or coordinate educational workshops, lectures, discussion, or one-on-one instruction on a variety of Infection Prevention and Control topics
      4. Evaluate the effectiveness of education and learner outcomes (e.g., behavior modification, compliance rate)
      5. Instruct patients, families, and other visitors about methods to prevent and control infections
   B. Research
      1. Apply critical reading skills to evaluate research findings
      2. Incorporate research findings into practice through education and consultation

CBIC Reference Books

References have been categorized as primary and secondary sources for content information. Nearly all questions are based on chapters in the primary references, but secondary references may be useful to help clarify more detailed issues in specific practice settings or content areas such as microbiology.

Primary References:

- *APIC Text of Infection Control and Epidemiology*, 3rd ed., *Volume I (Essential Elements)* and *Volume II (Scientific and Practice Elements)*, APIC, Washington, DC, 2009, including on-line version 2010.
- Heymann, David L., ed. *Control of Communicable Diseases Manual*, 19th ed., Washington, DC: American Public Health Association; 2008.
- Brooks, Kathy. *Ready Reference to Microbes*, APIC; 2007.

Secondary References:

- Current Recommendations of the Advisory Committee on Immunization Practices (ACIP).
- Current guidelines, standards, and recommendations from CDC, APIC, SHEA, and Public Health Agency of Canada.
- Pickering, Larry K, ed. *Red Book*, 28th ed., Elk Grove Village, IL: American Academy of Pediatrics; 2009.
- *Red Book*® 28th ed., 2009: *Report of the Committee on Infectious Diseases by the American Academy of Pediatrics*.

Please note: In the CIC exam, the term "standards precautions" is equivalent to the Canadian term "routine precautions."

CBIC Practice Examination

The Certification Board of Infection Control and Epidemiology (CBIC) Practice Examination is a 70-item online practice examination that proportionally matches the content, cognitive levels, and difficulty of the CBIC certification examination. Although the content coverage is not as broad (this practice exam is only 70 questions, whereas the CBIC certification examination is scored and contains 150 items), it is still intended to reflect the content areas included in the computer-based test. The Practice Examination was developed by the CBIC Test Committee to help you prepare for the certification examination. It is an excellent tool for practitioners to become comfortable with the computer-based testing format and may help in assessing their readiness to take the CIC® examination.

For more information and for purchasing the CBIC Practice Examination visit the following Web site: http://www.cbic.org/onlinepracticeexam.asp.

Sample Questions

The following sample questions are illustrative of the format found in the examination, but do not necessarily represent the level of difficulty.

1. In an outbreak of probable foodborne illness, patients developed symptoms two to four hours after eating turkey salad. The MOST likely causative organism is
   A. *Salmonella enteritidis.*
   B. *Staphylococcus aureus.*
   C. *Vibrio parahaemolyticus.*
   D. *Clostridium perfringens.*

2. The presence of which of the following antibodies to hepatitis A virus confirms the diagnosis of acute hepatitis A?
   A. IgG
   B. IgM
   C. IgE
   D. IgD

3. In investigating an epidemic, cases should be categorized according to
   A. time, place, and person.
   B. agent, host, and environment.
   C. agent, host, and date of onset.
   D. time, person, and date of onset.

4. The lengths of stay for patients with nosocomial infections are 12, 12, 12, 13, 15, 15, 16, 20, and 30 days. What is the median length of stay?
   A. 12 days
   B. 15 days
   C. 16 days
   D. 25 days

5. The risk of nosocomial urinary tract infections in spinal cord injury patients is BEST reduced by
   A. prophylactic antibiotics.
   B . bladder instillation of antiseptic.
   C . intermittent catheterization.
   D. placement of all patients with urinary catheters in the same area.

6. Which of the following precautions MUST be taken when using respiratory ventilators?
   A. Use gloves while assembling equipment.
   B . Use only disposable equipment.
   C . Use only sterile fluids in reservoirs.
   D. Discard unused portions of medication daily.

7. A student demonstrates appropriate tracheostomy suctioning technique to an instructor. This is an example of
   A. cognitive learning.
   B. psychomotor learning.
   C. affective learning.
   D. theoretical learning.

8. Which of the following societal problems increases the risk of tuberculosis spread?
   I. increasing homeless population
   II. overcrowding in prisons
   III. increasing teenage tobacco use
   IV. PPD skin test reactions from BCG vaccination in immigrants
   A. I and II only
   B. III and IV only
   C. I, II, and III only
   D. I, II, III, and IV

ANSWERS

1. B	5. C
2. B	6. C
3. A	7. B
4. B	8. A

SARE Schedule

Purchase Deadline	Completed Deadline
December 1	December 31

Certification Examination Fees

First-Time Certifiers (applicants not yet certified or lapsed certifiers) $310
Recertifying Candidates (recertifying within 5-year cycle) $275
International Assessment Center Fee (additional) $35

Self-Achievement Recertification Examination (SARE)
Recertifying Candidates $340

CBIC Executive Office

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Suite 1100
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