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# Certification Overview

#### **About the Examinations**

The examination content is based upon results of a practice analysis, which is a survey of practicing professionals in infection prevention and control that is conducted by the Certification Board of Infection Control and Epidemiology, Inc. (CBIC®) every 4-5 years. The most recent practice analysis was conducted in 2014. The practice analysis determines the scope of knowledge and responsibilities that are currently required by, and are representative of, individuals practicing infection prevention and control. It is important to recognize that examination content is based on this information, even though all elements of the examination may not seem to be directly relevant to every individual taking the exam.

CBIC is responsible for determining the examination content outline, developing and maintaining an item bank of approved examination questions, approving individual exam applications, and setting the standard for minimum competency in the form of the exam passing score

Individual eligibility for admission to the examinations are based on criteria set by CBIC. Our testing company, Prometric, is responsible for the examination administration, examination security, scoring and statistical analysis of examination content.

CBIC is a Charter member of the Institute for Credentialing Excellence (ICE). CBIC is accredited by the National Commission for Certifying Agencies (NCCA). NCCA accreditation signifies that CBIC has met the highest standards for establishing a valid, reliable, and secure certification process.

#### About the CIC® Certification Examination

The CIC® infection control certification examination is the standardized measure of the basic knowledge, skills and abilities expected of professionals working in infection prevention and control. The CIC® certification examination is offered five to seven days a week at testing centers throughout the United States, Canada, and select international sites. The initial certification exam is available in English and Canadian French.

The initial CIC® certification exam is an objective, multiple-choice examination consisting of 150 questions (135 of these questions are used in computing the score).

## CIC® Certification Quick Facts

# How many questions are on the exam?

The CIC® exam has 150 multiple-choice questions on the exam, 135 of which are scored.

#### What is on the exam?

Scroll down to <u>page 14</u> to view the examination content outline.

# What is the timeframe to take the CIC® examination?

The examination is offered throughout the year. Once your application is approved, you have a 90-day period to schedule and sit for your exam.

# Where is my closest Prometric testing center?

Visit <a href="https://www.prometric.com/test-takers/search/cbic">https://www.prometric.com/test-takers/search/cbic</a> to locate your nearest <a href="https://center.com/cente

# How often do I need to renew my CIC® certification?

Recertification must successfully be completed every five years.

# How is recertification completed?

Recertification is completed by passing the online recertification examination or submitting a portfolio of Infection Prevention Units. More information on this is found on page 27.



### **Objectives of CIC® Certification/Recertification**

The purpose of the CIC® certification and recertification 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 professionals in infection prevention and control; and
- 3. Formally recognizing professionals in infection prevention and control who fulfill the requirements for CIC® certification and recertification.

### Eligibility Requirements for CIC® Certification

In order to be eligible to take the initial certification exam, you must meet ALL of the following requirements:

First-time candidates, candidates who have not successfully passed the examination, and lapsed certificants must:

- 1. Be accountable for the infection prevention and control activities/program in your setting and this is reflected in the current job description.
- 2. Have a post-secondary degree from an accredited institution.

Have a three-year Diploma RN degree (applicable through December 31, 2020 only)

- 3. Have had sufficient experience (recommended: two years) in infection prevention and control which includes all three (3) of the following:
  - Identification of infectious disease processes
  - Surveillance and epidemiologic investigation
  - Preventing and controlling the transmission of infectious agents
- 4. And at least two (2) of the remaining five (5) components:
  - Employee/occupational health
  - Management and communication
  - Education and research
  - Environment of care
  - Cleaning, sterilization, disinfection, and asepsis

To obtain the CIC® credential, professionals in infection prevention and control must meet the eligibility requirements and pass the initial CIC® certification exam to become certified. Certification in infection prevention and control is valid for five years from the year of successful examination. For example, candidates who certify in 2015 must recertify in 2020, 2025, etc. This is because changes in infection prevention best practices occur frequently. Certified professionals who do not recertify before their certification period expires will lose their CIC® designation as of December 31st of the last year of the certification period. Use of the CIC® designation is prohibited until they have reapplied and successfully passed the initial certification exam. The assessment of "sufficient experience" is individual to the candidate and can vary; CBIC recommends two years of experience in infection prevention and control. Candidates who are comfortable with their knowledge and experience may sit for the exam whenever they are ready. However, analysis of our data has demonstrated greater success amongst candidates with at least two years of experience in the field.



### Renewing Lapsed/Expired CIC® Certification

If you fail to recertify when you are due and later decide that you would like to once again be certified, you must meet the criteria for initial CIC® certification and reapply as a new candidate.

#### Recertification for the CIC®

Recertification by examination or continuing education units in the form of a "professional portfolio" is required in order to maintain the CIC® designation. All currently certified (CIC®) professionals in infection prevention and control are eligible for recertification during the year that their certification is due to expire. Continuing education, hereby referred to as Infection Prevention Units (IPUs), can be achieved through a variety of ways and can be earned through the five years prior to recertification.

To maintain current certification, the internet-based recertification examination must be completed by 11:59 pm Greenwich Mean Time (6:59 pm EST) on December 31 of the CICs recertifying year or the recertification portfolio must be submitted by 11:59pm GMT (6:59 pm EST) on October 31 to allow for review. If a candidate fails to successfully recertify by the deadline, his/her certification will be considered to be expired and the CIC® designation can no longer be used. The candidate will then be required to apply for and pass the initial CIC® certification examination, meeting all of the eligibility requirements, in order to once again be considered certified and use the CIC® designation again.

The recertification examination and portfolio are offered in an English-only, internet-based format.



#### **About the a-IPC Certification Examination**

The a-IPC (Associate – Infection Prevention and Control) entry-level certification examination is a measure of basic infection prevention competency. It is intended for the novice IP and those interested in pursuing careers in infection prevention and control. The a-IPC examination is an objective, multiple-choice examination consisting of 100 questions (85 of these questions are used in computing the score).

#### **Objectives of a-IPC Certification**

The purpose of the a-IPC certification process is to protect the public by:

- Providing standardized measurement of current essential knowledge needed for persons interested in a career in infection prevention;
- Encouraging individual growth and study, thereby promoting professionalism among professionals in infection prevention and control; and
- 3. Formally recognizing professionals pursuing a position in the field of infection prevention and control.

To obtain the a-IPC credential, a candidate must only have interest in the field of infection prevention and control and pass the examination. The a-IPC credential is valid for three (3) years, at which time the a-IPC credential is not renewable and successfully passing the CIC® examination is the only method to maintain certification in infection prevention and control.

### **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 civil and criminal penalties. Candidates are forbidden from describing or sharing examination content.

#### Statement of Non-Discrimination

CBIC offers examinations to all eligible persons regardless of age, gender, race, religion, national origin or disability.

### a-IPC Certification Ouick Facts

# How many questions are on the exam?

The a-IPC exam has 100 questions, 85 of which are scored.

#### What is on the exam?

Click here or scroll down to page 18 to view the examination content outline.

# What is the timeframe to take the examination?

The a-IPC is offered throughout the year. Once your application is approved, you have a 90-day period to schedule and sit for your exam.

#### Where is my closest Prometric testing center?

Visit <a href="https://www.prometric.com/test-takers/search/cbic">https://www.prometric.com/test-takers/search/cbic</a> to locate your nearest center.

# How do I renew my a-IPC certification?

The a-IPC is not renewable and successfully passing the CIC® examination is the only method to maintain certification in infection prevention and control.



# Applying for Certification

## CIC® Confirmation of Eligibility

### Applying for the CIC® Examination

To apply online:

Go to www.cbic.org and select the "Exam Applications" link under the "Get Certified" tab.

To apply using a paper application:

Complete the paper application and mail or fax it, along with the required documents, to the CBIC Office at the following address:

CBIC

555 East Wells Street

Suite 1100

Milwaukee, WI 53202

Fax: (414) 276-3349.

#### You must include ALL of the following with your completed CIC® application form:

- 1. Proof of diploma/degree or transcript.
- 2. Completed attestation statement form signed by your supervisor/director, attesting that you meet all of the eligibility requirements (see Eligibility Requirements, page 3).
- 3. Official job description for the position in which you are currently employed, also signed by your supervisor/director.
- 4. A copy of your CV or resume.
- 5. <u>Self-employed applicants only</u>: Candidates must have client attestation statements completed by three (3) clients whom they have provided infection prevention and control services to in the past 2 years. The client attestation statement form for self-employed candidates can be downloaded from the CBIC website. Attestation statements should be directly forwarded by the person completing them to the CBIC Office at 555 East Wells St., Suite 1100, Milwaukee, WI 53202.
- 6. Payment of the examination fees. If using a paper application, payment in U.S. dollars may be made by personal check, cashier's check, money order or credit card. If applying online, payment must be made by credit card.

CBIC reserves the right to verify all information supplied by the candidate. An application is considered complete when:

- 1. all requested information has been submitted and determined to be accurate,
- 2. examination fees have been submitted.
- 3. the candidate has been determined eligible for the examination.

#### **CIC® Examination Fees**

The fee for the initial CIC® certification examination is \$375. Candidates must submit the appropriate fee with a complete examination application.

Your application is not complete until you receive an email confirmation of eligibility containing instructions on how to schedule your examination. If a CIC® application is incomplete or there is not sufficient proof of eligibility, a CBIC staff member will contact the applicant via the email address provided on the application with further instructions.

CBIC sends candidates an email confirmation of eligibility containing exam scheduling instructions to the candidate within seven (7) business days of acceptance of the application. If eligibility is denied, you will be contacted by CBIC. If a confirmation notice is not received within two weeks of submission, contact CBIC at (414) 918-9796 or info@cbic.org.

### Applying for the a-IPC Examination

To apply online:

Go to www.cbic.org and select the "Exam Applications" link under the "Get Certified" tab.

No further documentation aside from the application and examination payment is required for the a-IPC. Once an application has been successfully submitted and payment processed, the candidate will receive an email notifying them of submission.

#### a-IPC Examination Fees

The fee for the a-IPC is \$295. Candidates must submit the appropriate fee with a complete examination application.

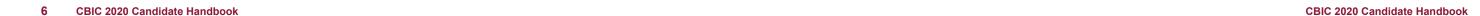
### a-IPC Confirmation of Acceptance

Your application is not complete until you receive an email confirmation containing instructions on how to schedule your examination. CBIC sends candidates an email confirmation to the candidate within seven (7) business days of acceptance of the application. If the application is not approved, you will be contacted by CBIC. If a confirmation notice is not received within two weeks of submission, contact CBIC at (414) 918-9796 or info@cbic.org.

The confirmation email includes instructions detailing how to schedule an examination appointment with Prometric online or by phone.

### CIC® and a-IPC Examination Policy

- > Requesting an Extension
  - This is intended for those who would like to extend their 90-day eligibility window, whether they have scheduled their examination appointment or not.
  - 1. Fill out an Extension Request Form.
    - Extension requests will not be considered under the following circumstances:
      - Not prepared to sit for the examination.
      - Requests submitted within 10 days of scheduled examination date or eligibility end-date without sufficient supporting documentation.
      - Examples of supporting documentation include: doctors note, verifiable letter from direct manager or supervisor, etc.
      - Request to extend eligibility beyond 60 days of scheduled examination date or eligibility end date.





- 2. Please allow 7-10 business days for your extension to be reviewed.
- 3. If your extension request is approved and you have already scheduled an examination appointment through Prometric, you must complete the following in order for CBIC to process your request:
  - a. Cancel your examination appointment through Prometric using this link.
  - Provide a screenshot or copy of the confirmation of cancellation email to the CBIC Office.
  - c. Complete a \$72 extension request invoice to CBIC (the invoice will be provided to you upon notification from CBIC).

If your extension request is approved and you have *not* scheduled an appointment through Prometric, you will only need to submit the \$72 extension request invoice.

4. After you have completed the above, please allow 5-7 business days for payment to be processed and to schedule a new examination appointment through Prometric with your new eligibility date (new eligibility date will be indicated in aforementioned invoice).

#### > Cancelling Examination Appointment and/or Eligibility

- You may cancel your eligibility at any point up until five days of appointment date (if scheduled) or eligibility end date, at which point examination fees will be forfeited.
- 1. If you have scheduled your appointment through Prometric, **you must cancel the appointment first** (fees may apply) using this <u>link</u>. Then, proceed to step 2. If you have not scheduled your appointment, go directly to step 2.
- 2. Contact the CBIC Office to make a cancellation request. You may reach CBIC at <a href="info@cbic.org">info@cbic.org</a> or 414-918-9796.
- 3. You will be refunded \$265 for the CIC® and \$215 for the a-IPC.



# Application and Order Forms

Online Application Form

Please visit www.cbic.org/CBIC/Certification-Forms.htm to apply online for all examinations.

Paper Application Form

- Initial Certification Examination
- Recertification Examination

Attestation Form

Client Attestation Form (Self-Employed)

**Special Accommodations** 

- Request for Special Accommodations
- Documentation of Disability Related Needs

# Application Quick Facts

# How long does it take to process applications?

Applications take up to seven (7) business days to process, including those for recertification. This timeframe is typically shorter for those applications submitted online.

# Can applications be emailed?

Applications may be emailed to <a href="mailto:info@cbic.org">info@cbic.org</a>.

#### Can I fax my application?

Applications can be faxed to (414) 276-3349. Please email or call to confirm all faxes.

# What if my application is not approved?

CBIC will make efforts to obtain further documentation from a candidate if the submitted documentation is incomplete or does not prove eligibility. If a candidate is ultimately determined ineligible, the candidate will be refunded their application fee in full.

# What if I want to cancel my application?

Applications will be refunded. Candidates will be refunded \$265 for the CIC and \$215 for the a-IPC

<sup>\*\*</sup>Any cancellation requests submitted outside the 90-day eligibility window will not be accepted.

<sup>\*\*</sup>If you are outside of your 90-day window, you must:

<sup>•</sup> Resubmit an application, application fee, and all supporting documentation to be considered for certification again.



# Taking the Certification Examinations

### Scheduling the Examinations

A candidate's eligibility is valid for 90 days after receiving the email confirmation notice from CBIC. *The examination must be scheduled and taken within this 90-day period.* A candidate who fails to schedule an exam appointment *within the 90-day eligibility period* forfeits his/her examination fees and must submit a new completed application and the appropriate examination fee in order to schedule an examination appointment.

For the CIC®, examination appointments are scheduled for a 3.5 hour window of time – three hours for the examination itself, and fifteen minutes on each end for completion of the tutorial and the post-exam survey.

For the a-IPC, examination appointments are scheduled for a 2.5 hour window of time – two hours for the examination itself, and fifteen minutes on each end for completion of the tutorial and the post-exam survey.

Candidates can schedule their examination by one of two methods:

- 1. By telephone: (800) 278-6222 (US and Canada only)
- 2. Online at https://www.prometric.com/test-takers/search/cbic.

#### To schedule an exam online:

- 1. Access <a href="https://www.prometric.com/test-takers/search/cbic.">https://www.prometric.com/test-takers/search/cbic.</a>
- 2. Click on "Schedule My Test"
- 3. Select the location at which you would like to test

Follow the instructions provided in your confirmation email for finding and selecting a test center location and test date and time.

#### To schedule an exam by phone:

- 1. Call (800) 278-6222 between 8:00 am and 8:00 pm EST Monday Friday and follow the prompts utilizing the eligibility number sent to you in your confirmation email.
- 2. At the end of the call, you will be given a number confirming your appointment. Record and keep this confirmation number for your records.

#### Rescheduling Your Appointment

You may reschedule or cancel your appointment on line at <a href="https://www.prometric.com/test-takers/search/cbic">https://www.prometric.com/test-takers/search/cbic</a> or by calling (800) 278-6222.

Prometric rescheduling fees are as follows:

- Rescheduling 30 days or more in advance No Charge
- Rescheduling between 5 and 29 days in advance \$30 Fee
- No rescheduling or cancellations are allowed within 5 days of your appointment; examination fees will be forfeited.



#### **Emergency Closings**

Severe weather or an emergency could require canceling scheduled exams. If this occurs, Prometric will attempt to contact candidates by phone or email; however, you may check for testing site closures by calling Prometric or logging on to <a href="https://www.prometric.com/closures">https://www.prometric.com/closures</a>. If the site is closed, your exam will be rescheduled without a rescheduling fee.

If a testing center is open for testing and you choose not to appear for testing, your fee will be forfeited and you will need to pay another full exam fee. Please call CBIC with any concerns regarding missed appointments due to unforeseen circumstances.

### **Special Arrangements for Candidates with Disabilities**

In compliance with the Americans with Disabilities Act (ADA) and Title VII of the Civil Rights Act, special testing accommodations will be considered for individuals with disabilities recognized by the ADA. Request for special accommodations must be made at the time of application. Please complete the Request for Special Accommodations and Documentation of Disability forms found on the CBIC website, in order to be eligible.

#### What to Bring to the Exam

You should arrive at least **30 minutes before** your scheduled exam appointment. You will be required to present one valid, government-issued ID (e.g., driver's license or passport, other federal or military ID), with your signature and a recognizable photograph. The identification document must be in Latin characters. If you are testing outside of your country of citizenship, you must present a valid passport.

All other personal items, including watches, must be secured in a locker for test security purposes, so please limit what you bring to the testing center. You will be screened with a metal detector during check-in. Please review the testing rules and regulations found on the Prometric website at <a href="https://www.prometric.com/test-takers/search/cbic">https://www.prometric.com/test-takers/search/cbic</a>.

### **New Accessories Policy**

Beginning on October 15<sup>th</sup>, 2016, Prometric is conducting stricter inspections of *any and all* eyeglasses, jewelry and other accessories to inspect for camera devices that could be used to capture exam content:

- All candidates are required to remove their eyeglasses for close visual inspection by testing
  center staff. These inspections will take a few seconds and will be done at check-in and again upon
  return from breaks.
- Jewelry outside of wedding and engagement rings is prohibited. Candidates may not wear other jewelry to the test center.
- Hair accessories are subject to inspection. Candidates should refrain from wearing ornate
  clips, combs, barrettes, headbands, and other hair accessories as they may be prohibited from
  wearing them in to the testing room and asked to store them in their locker.
- If candidate is caught with a camera device prior to entering the testing room, Prometric will confiscate and they won't be able to test.
- If a candidate is caught with a camera device while in the testing room, Prometric will confiscate and the exam will be terminated.





- If you do not provide correct identification at the time of the exam, it is considered a missed appointment. Your identification must match what you use to submit your application. You will be required to pay another full exam fee before choosing another appointment.
- If you arrive more than 30 minutes late for an appointment, examination fees will be forfeited. If you are a no-show to your appointment, examination fees will be forfeited.

### **Test Center Regulations**

To ensure that all candidates are tested under equally favorable conditions, the following regulations and procedures will be observed at each test center. Failure to follow any of these security procedures may result in the disqualification of your examination and removal from the testing center. Prometric reserves the right to audiotape and videotape any examination session.

#### References

No reference materials, papers or study materials are allowed at the test center.

If you are found with these or any other aids, you will not be allowed to continue the exam and your answers will not be scored. Candidates do not need to bring a calculator into the examination room with them – an onscreen calculator is provided for your convenience.

#### Personal Items

Prometric is not responsible for items left in the reception area of the test center. While lockers are provided, it is recommended that personal items not be brought into the test center. Note the following:

- Electronic equipment— cell phones, PDAs, pagers, cameras, tape recorders, etc.—are not permitted in the testing room and must be powered off while stored in a locker.
- Other personal items—watches, outerwear such as sweaters and jackets not being worn while testing, briefcases, purses, etc.—are not permitted in the testing room.
- Candidates may bring their own foam ear plugs into the examination room with them if they are sensitive to the noise of other candidates taking exams.

#### **Breaks**

Every time you enter the test room, you will be asked to turn your pockets inside out to confirm that you have no prohibited items. The test center administrator will collect any materials that are in violation of the rules.

If you leave the testing room while an exam is in progress, you must sign out/in on the roster and you will lose the exam time of the absence. You are not allowed to use any electronic devices or phones during breaks.

#### **Visitors**

No guests, visitors or family members are allowed at the test center.

#### Misconduct or Disruptive Behavior

Candidates who engage in any kind of misconduct or disruptive or offensive behavior maybe dismissed from the examination. Examples are: giving or receiving help, taking part in an act of impersonation, removing test materials or notes from the testing room, using rude or offensive language and behavior that delays or interrupts testing.

#### Weapons

Weapons are not allowed at the test center.



### **Copyrighted Questions**

All test questions are the property of the Certification Board of Infection Control and Epidemiology, Inc. (CBIC) and are protected by copyright. Federal law provides severe civil and criminal penalties for the unauthorized reproduction, distribution, or exhibition of copyrighted materials.

Test center administrators are not allowed to answer any questions pertaining to the exam content. If you do not understand a question on the examination, you should answer the question to the best of your ability. Opportunity for feedback will be provided in the post-exam questionnaire.



# Preparing for the Certification Examinations

This section of the handbook outlines resource materials recommended by CBIC for examination preparation. The expanded examination content outline provided below, is a useful tool for course and curriculum preparation and to judge the relevance of topics to the content of the examination. The below content outline is for the initial certification examination. *Please note:* The recertification examination content outline contains the same content as listed below but the scored domains and number of items in each domain area may vary slightly. This section also contains reference lists for all examinations, as well as information about the CBIC practice examination.

#### 2020 CIC® Examination Content Outline

#### 1) Identification of Infectious Disease Processes (22 items)

- a. Interpret the relevance of diagnostic and laboratory reports
- b. Identify appropriate practices for specimen collection, transportation, handling, and storage
- c. Correlate clinical signs and symptoms with infectious disease process
- d. Differentiate between colonization, infection and contamination
- e. Differentiate between prophylactic, empiric and therapeutic uses of antimicrobials

#### 2) Surveillance and Epidemiologic Investigation (24 items)

- a. Design of Surveillance Systems
  - Conduct a risk assessment on the population served, services provided, and regulatory or other requirements
  - 2. Develop goals and objectives based upon the risk assessment
  - 3. Develop a surveillance plan based on the goals identified from the risk assessment
  - 4. Evaluate periodically the effectiveness of the surveillance plan and modify as necessary
  - 5. Create a notification system based on surveillance plan including epidemiologically significant findings
  - 6. Integrate surveillance activities across health care settings (e.g., ambulatory, home health, long term care, acute care)
  - 7. Establish mechanisms for identifying individuals with communicable diseases requiring follow-up and/or transmission based precautions
- b. Collection and Compilation of Surveillance Data
  - 1. Use a systematic approach to record surveillance data
  - 2. Organize and manage data in preparation for analysis
  - 3. Calculate the incidence or prevalence of infections
  - 4. Calculate specific infection rates/ratios (e.g., provider-specific, unit-specific, device-specific, procedure-specific, Standardized Infection Ratio)
  - 5. Use of standardized definitions



#### c. Interpretation of Surveillance Data

- 1. Generate, and validate surveillance data
- 2. Use basic statistical techniques to describe data (e.g., mean, standard deviation, rates, ratios, proportions)
- 3. Monitor and interpret the relevance of antimicrobial susceptibility patterns
- 4. Compare surveillance results to published data and/or other relevant benchmarks
- 5. Analyze and interpret data using appropriate methods
- 6. Prepare and present findings in an appropriate format that is relevant to the audience/ stakeholders (e.g., graph, tables, charts)
- 7. Develop and facilitate corrective action plans based on surveillance findings
- 8. When to implement an epidemiological study to investigate a problem (e.g., case control, cohort studies)

#### 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 (25 items)

- a. Develop evidence-based/informed infection prevention and control policies and procedures
- b. Collaborate with relevant groups and agencies in planning community/facility responses to biologic threats and disasters (e.g., public health, anthrax, influenza)
- c. Identify and implement infection prevention and control strategies related to:
  - 1. Hand hygiene
  - 2. Cleaning, disinfection, and sterilization
  - 3. Wherever healthcare is provided (e.g., patient care units, operating room, ambulatory care center, home health, pre-hospital care)
  - 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, food, medications, and supplies
  - 6. Transmission-based Precautions
  - 7. Appropriate selection, use, and disposal of Personal Protective Equipment
  - 8. Patient placement, transfer, and discharge
  - 9. Environmental pathogens (e.g., Legionella, Aspergillus)
  - 10. Use of patient care products and medical equipment
  - 11. Immunization programs for patients
  - 12. The influx of patients with known/suspected communicable diseases (e.g., bioterrorism, emerging infectious diseases, syndromic surveillance)
  - 13. Principles of safe injection practices (e.g., parenteral medication administration, single use of syringes and needles, appropriate use of single and multi-dose vials)
  - 14. Identifying, implementing and evaluating elements of Standard Precautions/Routine Practices (e.g., respiratory hygiene/cough etiquette)
  - 15. Antimicrobial stewardship





- a. Review and/or develop screening and immunization programs
- b. Collaborate regarding counseling, follow up, and work restriction recommendations related to communicable diseases and/or exposures
- c. Collaborate with occupational health to evaluate infection prevention-related data and provide recommendations
- d. Collaborate with occupational health to recognize healthcare personnel who may represent a transmission risk to patients, coworkers, and communities
- e. Assess risk of occupational exposure to infectious diseases (e.g., *Mycobacterium tuberculosis*, bloodborne pathogens)

#### 5) Management and Communication (13 items)

- a. Planning
  - 1. Develop, evaluate, and revise a mission and vision statement, goals, measurable objectives, and action plans for the Infection Prevention and Control Program
  - 2. Assess needs then recommend specific equipment, personnel, and resources for the Infection Prevention and Control Program
  - 3. Participate in cost benefit assessments, efficacy studies, evaluations, and standardization of products
  - 4. Recommend changes in practice based on current evidence, clinical outcomes, and financial implications
  - 5. Incorporate business modeling to assign value to prevention of and/or presence of healthcare-associated infection (e.g., cost/benefit analysis, return on investment)

#### b. Communication and Feedback

- 1. Provide infection prevention and control findings, recommendations, and reports to appropriate stakeholders
- 2. Facilitate implementation of policies, procedures, and recommendations
- 3. Communicate effectively with internal and external stakeholders (e.g., transitions of care, reporting of notifiable diseases)
- 4. Collaborate with internal and external stakeholders in the identification and review of adverse and sentinel events
- 5. Evaluate and facilitate compliance with accreditation standards/regulatory requirements
- 6. Perform and create a personalized development plan. (e.g., set goals, maintain competence)
- c. Quality Performance Improvement and Patient Safety
  - 1. Participate in quality/performance improvement and patient safety activities related to infection prevention and control (e.g., failure mode and effects analysis, plan-do-study-act)
  - 2. Develop, monitor, measure, and evaluate performance indicators to drive quality improvement initiatives
  - 3. Select and apply appropriate quality/performance improvement tools (e.g., "fishbone" diagram, Pareto charts, flow charts, Strengths-Weaknesses-Opportunities-Threats, Gap Analysis)



#### 6) Education and Research (11 items)

#### a. Education

- 1. Assess needs, develop goals and measurable objectives for preparing educational offerings
- 2. Prepare, present, or coordinate educational content that is appropriate for the audience
- 3. Provide immediate feedback, education, and/or training when lapses in practice are observed
- 4. Evaluate the effectiveness of education and learner outcomes (e.g., observation of practice, process measures)
- 5. Facilitate effective education of patients, families, and others regarding prevention and control measures
- 6. Implement strategies that engage the patient, family, and others in activities aimed at preventing infection

#### b. Research

- 1. Conduct a literature review
- 2. Critically appraise the literature
- 3. Facilitate incorporation of applicable research findings into practice

#### 7) Environment of Care (14 items)

- a. Recognize and monitor elements important for a safe care environment (e.g., Heating-Ventilation-Air Conditioning, water standards, construction)
- b. Assess infection risks of design, construction, and renovation that impact patient care settings
- c. Provide recommendations to reduce the risk of infection as part of the design, construction, and renovation process
- d. Collaborate on the evaluation and monitoring of environmental cleaning and disinfection practices and technologies
- e. Collaborate with others to select and evaluate environmental disinfectant products

#### 8) Cleaning, Sterilization, Disinfection, Asepsis (15 items)

- a. Identify and evaluate appropriate cleaning, sterilization and disinfection practices
- b. Collaborate with others to assess products under evaluation for their ability to be reprocessed
- c. Identify and evaluate critical steps of cleaning, high level disinfection, and sterilization

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

#### 2020 a-IPC Examination Content Outline

- 1) Identification of Infectious Disease Processes (14 items)
- 2) Surveillance and Epidemiologic Investigation (15 items)
- 3) Preventing/Controlling the Transmission of Infectious Agents (16 items)
- 4) Employee/Occupational Health (7 items)
- 5) Management and Communication (8 items)
- 6) Education and Research (7 items)
- 7) Environment of Care (9 items)
- 8) Cleaning, Sterilization, Disinfection, Asepsis (9 items)





References have been categorized as primary and secondary sources for content information. Most questions are based on material in the primary references. 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, 4th ed., Volume I, Volume II and Volume III, APIC, Washington, DC, 2014.
- Kulich P, Taylor D, eds. *The Infection Preventionist's Guide to the Lab*, APIC, Washington, DC, 2012.
- Heymann, D., ed. *Control of Communicable Diseases Manual*, 20th ed., Washington, DC: American Public Health Association; 2015.
- Brooks, Kathy. Ready Reference for Microbes, 4th ed., APIC; 2018.

#### 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*, 30th ed., Elk Grove Village, IL: American Academy of Pediatrics; 2015.

#### **CBIC Practice Examination**

CBIC offers an online practice examination, available on our website at www.cbic.org. The CBIC practice examination is a 70-question multiple choice computer-based test, and can be purchased for \$50. Once purchased, the practice examination must be taken immediately, and expires three hours after purchase.

The online practice examination allows candidates to familiarize themselves with the testing software. It is an excellent tool for applicants to become comfortable with the computer-based testing format. Please note that this practice examination is not intended as a content-based study tool, and does not accurately reflect the current content on the CIC® or a-IPC examinations. For this reason, the practice examination does not provide answers for the questions after submission, but merely reflects a "pass" or "fail" to the candidate.

Please note: Good performance on this practice examination does not guarantee that candidates will pass the CIC® or a-IPC examinations and should not be used as an assessment of readiness

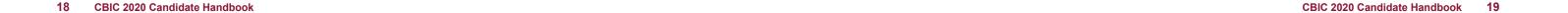
For more information about the CBIC practice examination, visit the CBIC website at the following address: <a href="https://www.cbic.org/CBIC/Online-Practice-Exam.htm">https://www.cbic.org/CBIC/Online-Practice-Exam.htm</a>. Please note, the Practice Exam is purchased through our testing company, Prometric.



#### **Sample Examination 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 healthcare associated infections are 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 healthcare-associated 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. A long-term care facility has 180 residents, 50 of whom have indwelling urinary catheters. An infection preventionist (IP) notes 15 catheterized residents have developed urinary tract infections during 1 month. Which of the following is the attack rate?

	•			
a. 3.0%		ANSW	ER	
. 8.3%		KEY:		
28.0%		1. B	5. C	
d. 30.0%		2. B	6. C	
		3. A	7. B	
		4 R	8 D	

#### **Certification Examination Fees**

С

First-time Candidates (CIC®)	\$375
(applicants not yet certified or lapsed certifiers)	
Lapsed Candidates (CIC®)	\$375
(applicants previously certified but whose certification has expired)	
Recertifying CICs by Exam	\$375
Recertifying CICs by IPUs	\$375
a-IPC Certification	\$295



## *After the Examinations*

#### **Score Report**

For candidates taking the CIC® certification examination or the a-IPC certification examination, a "pass" or "fail" one-page printed report will be given to the candidate immediately after completion by Prometric testing site staff. For candidates taking the recertification examination, an instant notification in the candidate's web browser, immediately following exam submission, will indicate a numerical score.

Candidates who pass either examination are given their overall score on the examination. Because candidates who pass the examination have successfully demonstrated minimum competency in the field, there is no need to provide candidates with diagnostic information on the individual sections.

Candidates who fail either examination are given their overall score, as well as diagnostic information on their performance in each exam section, in order to guide their preparation for their next exam attempt. Please see the diagram below for information on the diagnostic levels used to indicate the performance of failed candidates.

Levels of Diagnostic Representation	Performance Level Description
High	Your performance on this content area is <b>above</b> the minimally acceptable level. However, a review of this content area may be helpful to you prior to retaking the examination.
Medium	Your performance on this content area is <b>around</b> the minimally acceptable level. Further study of this content area is recommended prior to retaking the examination.
Low	Your performance on this content area is <b>below</b> the minimally acceptable level. Substantial study of this content area is recommended prior to retaking this examination.

Although the CIC® examination consists of 150 questions, the candidate's score is based on 135 questions. Fifteen questions on each exam are "pretest" questions and are used as part of the item evaluation for inclusion in subsequent exams. The a-IPC exam is 100 questions. The candidate's score is based on 85 questions. Fifteen questions on each exam are "pretest" questions and are used as part of the item evaluation for inclusion in subsequent exams. The method used to set the minimum passing score for both exams is the Angoff method, in which content experts have evaluated each examination question and determined how many correct answers are necessary to demonstrate the knowledge and skills required to pass.

A candidate's ability to pass either examination depends on the knowledge and skill he/she displays, and 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 meets the content distribution requirements of the examination content blueprint. Because each scored 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. Slight variations in difficulty level between different versions of the exam 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 incorrectly answered examination questions, and correct answers to questions, will not be provided to the candidate. This practice is in accordance with best practices in the field of professional accrediting.

#### **Candidates Who Pass the Examinations**

Candidates who pass their CIC® examination are allowed to use the designation CIC® after their name for the five-year in which their certification is valid.

Candidates who pass their a-IPC examination are allowed to use the designation a-IPC after their name for the three-year period in which their certification is valid.

CBIC reserves the right to publicly recognize any candidate who has successfully completed a CBIC certification examination, thereby earning the certification credential. An electronic version of the official certificate will be available 2-3 days after completion of the exam. A physical copy of the official certificate and the option to order a replacement certificate is also available. All certificate requests and orders can be accessed on the CBIC website (https://cbic.execinc.com/edibo/CertificateReplacement).

A directory of all certified infection prevention and control professionals is published and updated every 2-3 days on the CBIC website (*www.cbic.org*). This list can be found using the "Find a CIC®" page. Please note that some certificants choose to opt out of the public directory. Information on the current certification status of an individual will be provided in writing upon request.

#### Candidates Who Do Not Pass the Examinations

#### First Time Applicants or Lapsed Applicants

Candidates who do not pass the CIC® or a-IPC certification examination must submit a new application, including appropriate documentation and fees if applicable, and be determined eligible to retake the exam. An individual may retake the CIC® certification exam a maximum of four times within a twelve month period, and no more than once every 90 days. The a-IPC may only be taken twice within a twelve month period, and no more than once every six months.

#### Recertifying Applicants

Candidates who do not pass the recertification cannot retake it, but may apply for, schedule and take the proctored certification exam before the current certification cycle ends to maintain their CIC®. Candidates whose portfolio is not approved cannot resubmit it, but may apply for, schedule and take the proctored certification exam before the current certification ends to maintain their CIC®. An individual may retake the initial certification exam a maximum of four times per year, and no more than once every 90 days. Documentation is not needed to apply in the case of failed recertificants.

### **Scores Cancelled by CBIC or Prometric**

CBIC and Prometric 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 Prometric are committed to rectifying such discrepancies as expeditiously as possible. CBIC may void examination results if, upon investigation, violation of its regulations is discovered.



#### **Code of Ethical and Professional Conduct**

#### **Preamble**

The Certification Board of Infection Control and Epidemiology, Inc. (CBIC) is an autonomous multidisciplinary board that provides direction for and administers the certification process for professionals in infection control and applied epidemiology. By completing and passing the certification exam, a certified professional is setting a standard of quality care the public expects, demands and deserves. The codes outlined herein are to guide candidates and certified professionals in the performance of their professional responsibilities and to promote the mission of CBIC: Provide pathways to assess and maintain infection prevention competency.

#### **Professional Care and Competence**

- a) Applicants and certified professionals shall act in a manner that justifies public trust and confidence, enhances the reputation of the profession and safeguards the interests of individuals and clients.
- b) Applicants and certified professionals shall act diligently in accordance with applicable technical and professional standards when providing professional services.
- c) Applicants and certified professionals shall pursue excellence in performing their duties.
- d) Applicants and certified professionals shall meet and comply with all terms, conditions, or limitations of any professional credential they hold.

#### **Professional Integrity and Objectivity**

- a) Certified professionals shall maintain a professional knowledge and skill level required to ensure that employers receive competent professional service based on current developments in practice, legislation, and techniques.
- b) Certified professionals shall pursue excellence in performing their duties.
- c) Certified professionals shall conduct all business transactions at arm's-length and free from offers and solicitation of gifts and favors, or other improper inducements.
- d) Certified professionals shall ensure accuracy of information and soundness of recommendations forwarded to another involved professional, agency or institution.

#### **Fraud-Related Conduct**

- a) An applicant or certified professional shall not present fraudulent documents when applying for certification or recertification.
- b) An applicant or certified professional shall not use a title designation, credential or license, company name, letterhead, publication, term, title or document which states or implies an ability, relationship or qualification that does not exist.
- c) An applicant or certified professional shall cooperate with a CBIC disciplinary investigation or proceeding.
- d) An applicant or certified professional shall not attempt to prevent or interfere with a complaint being filed or CBIC disciplinary investigation or proceeding to occur. Interference attempts may include but are not limited to:
  - 1. The use of threats or harassment against, or an inducement to, any person in an effort to prevent or attempt to prevent a complaint from being filed, prosecuted or completed;
  - 2. The use of threats or harassment against, or an inducement to, any consumer or witness in an effort to prevent them from providing evidence in an investigation, disciplinary proceeding or any other legal action; and
  - 3. The willful misrepresentation of facts before the disciplinary authority or its authorized representative.
- e) Judicial Review for applicants and certified professionals will adhere to the codes and bylaws of the Judicial and Ethics process, herein detailed in the Policy & Procedures Manual under Section 2, Category 5 Judicial and Ethics Process.



#### **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 found in the <a href="Policy & Procedures Manual">Policy & Procedures Manual</a> or by contacting the CBIC Office:

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

### **Appeals**

Our goal is to provide a quality exam and a pleasant testing experience for every candidate. If you are dissatisfied with either and believe we can correct the problem, we would like to hear from you. We also provide an opportunity for general comments at the end of your exam. Our personnel will review your comments, but you may not receive a direct response.

If you have an examination issue that you would like to have directly addressed, please contact the CBIC office at <a href="mailto:info@cbic.org">info@cbic.org</a> or (414) 918-9796 and CBIC will respond to your concerns. Processes for specific issues are outlined below.

**To appeal an eligibility decision**, please submit an <u>Appeal Request Form</u> to <u>info@cbic.org</u> that describes the reason for the eligibility decision appeal.

- Please attach all supporting documentation that provides evidence for your appeal.
- Once the CBIC office has received this information, it is sent to the Exam Advisory Committee who
  reviews all of the details and supporting evidence. This process may take 5-7 business days to
  complete.
- Once a decision has been made, the CBIC office will contact you via email with the decision. If
  the Exam Advisory Committee has decided not to grant the appeal, a detailed explanation will
  be provided for why that decision was made. In the event that the appeal is granted, application
  processing will continue and you should expect to receive your scheduling instructions email within
  2-3 business days.

**To appeal an examination score**, please submit an <u>Appeal Request Form</u> to the CBIC office within a reasonable window of time from the date of your examination requesting a re-score of your examination.

- The CBIC office will put you in contact with our team at Prometric. With all exam re-score requests, there is a \$50 fee paid to Prometric.
- Note: Prometric does not recommend that candidates have their examination re-scored, as the exam goes through two separate automated scoring processes before the score is presented to the candidate at the testing center. The likelihood of the exam being scored incorrectly is very unlikely.



# CIC® Recertification Overview

#### CIC® Recertification

All recertification candidates are required to take the internet-based recertification examination or submit a continuing education professional portfolio indicating completion of a minimum of 40 approved Infection Prevention Units (IPUs). Candidates who fail the recertification examination or do not have their portfolio submitted or approved by the deadline will need to apply to recertify via the proctored recertification examination at a testing center, as outlined in the policy below. Recertification must be completed before the certification cycle ends.

### **Recertification by Examination**

The recertification exam is a 150-multiple choice question, internet-based examination designed to assess the knowledge of professionals in infection prevention and control and epidemiology. Recertification questions have been developed by CBIC specifically for the recertification examination. Like the initial certification exam, recertification questions are based on the most current CBIC practice analysis. The content outline is similar to the one used for the initial certification examination however, the scored domains and number of items in each domain area may vary slightly. The questions developed are held to the same standards as are used for the initial certification exam.

Unlike the initial certification exam that is completed at a three-hour appointment, time to complete the recertification examination is unlimited, provided it is submitted by December 31 of the year in which certification expires. Recertification candidates can log into and out of the exam site repeatedly, and are able to research the answers to questions prior to submitting their responses. The purpose of the recertification examination is to demonstrate continued knowledge and mastery in the field of infection prevention and control.

# Applying for the CIC<sup>®</sup> Recertification Examination

Application for the recertification examination must be submitted before November 30 of the same calendar year the candidate is due for recertification. Candidates are encouraged to purchase their examination early in their recertification year.

### CIC® Recertification Quick Facts

#### How often do you need to recertify?

Your certification expires on December 31st of the fifth year of your certification regardless of when you first certified.

#### How do you recertify?

Recertification is attained by achieving a passing score on the recertification exam or submitting a continuing education portfolio with a minimum of 40 approved units.

# When can you purchase the recertification examination?

You may purchase the recertification exam beginning in January of your recertification year.

# When can you begin logging IPUs into your professional portfolio?

You may begin logging your IPUs beginning January 1 of your recertification year.

# How long do I have to complete the recertification exam?

You have the entirety of your recertification year to recertify. Therefore if you buy the exam in January you have the whole year to take the test. However, if you buy the exam by December 1, you have the remainder of that month to take the exam.

#### How long do I have to log my IPUs?

You have until October 31 of your recertification year to complete your portfolio.

# What is the deadline to purchase the exam?

November 30 of your recertification year.



# CEBIC® Certification Board of Infection Control and Epidemiology, Inc.

#### To apply online:

Go to <u>www.cbic.org</u> and proceed to the "Recertify Tab" and then "Recertification by Examination", and then to the "<u>Online Application</u>" link.

#### To apply using a paper application:

Complete the paper application and mail or fax it to the CBIC Office:

555 East Wells St.

Suite 1100

Milwaukee, WI 53202

Fax: (414) 276-3349

The cost of the recertification examination is \$375. Payment in U.S. dollars must be included with the application. Payment can be made by personal check, cashier's check, money order or credit card. The fee is non-refundable.

The deadline to purchase the recertification exam is November 30 of the year in which current certification expires. The recertification exam must be submitted by December 31 of the same year. There are no extensions to this deadline for any reason. Candidates should allow themselves ample time to complete the recertification exam, researching information as needed.

#### CIC® Recertification Exam Schedule

Purchase Deadline	November 30
Completion Deadline	11:59 pm Greenwich Mean Time on December 31

### Taking the CIC® Recertification Examination

Within seven (7) business days of receipt of an application for the recertification exam, the candidate will receive a confirmation email with specific instructions on how to log in to the examination. Candidates will be able to log in and out as many times as necessary, prior to certification expiration, to complete the examination. Responses provided during previous sessions will be saved; however, it is important to read all instructions prior to exiting each session.

### **Recertification by Continuing Education Portfolio**

Recertification by Infection Prevention Units (IPUs) is achieved every five years by submitting a "professional portfolio" of earned points from projects or activities using the interactive online submission system. IPUs can be achieved through a variety of activities including presentations, publications, academic education, national conferences, multi-day educational offerings, participation in a professional organization, research and teaching. IPUs may be earned throughout the five years before the recertification deadline. A minimum of 40 units must be achieved and reported. Unit documentation will be accepted electronically via the online portfolio only.

#### Infection Prevention Unit Portfolio

Each project and activity has defined values. Pre-approval of non-defined activities will be addressed on a case by case basis by the Exam Advisory Committee. Portfolios are developed using these values to equal a minimum of 40 IPUs. The portfolio will be reviewed to ensure it meets the recertification requirements. A randomized audit shall occur by the Exam Advisory Committee with assistance from CBIC staff unless there is an obvious discrepancy upon submission.

Category	Description of Activity	Number of Infection Prevention Units (IPUs)	Maximum Number of IPUs	Examples of Participating Providers	Required Documentation
Online, paper, or live format education	Complete offerings from an accredited/vetted source that provide continued education credits specific to the domains	1 IPU per activity hour	No max	APIC, CDC, SHEA, IDSA, IPAC Canada	Certificate of completion/ attendance
Organizational education offerings (includes multiday or single day activities)	Related educational offerings (in-person classes/ workshops; online courses of study) from national organizations (examples: APIC EPI 201, APIC-SHEA Joint Leadership Development Course)	10 IPUs per completed education offering	No max	APIC, IPAC Canada, SHEA, State Hospital Associations, ANA, IDSA	Certificate of attendance/ completion
	Attendance at national infection prevention and control conferences (examples: APIC, IPAC Canada, and IDSA)	10 IPUs per conference	No max	APIC, IPAC Canada, IDSA	Certificate of attendance
National conferences	Other related conferences with infection prevention sessions (examples: conferences not specifically infection prevention and control centric but having an IPC educational session, such as AORN, AAMI, ASM, ANCC, SGNA)	1 IPU per session hour	No max	AORN, AAMI, ANCC, ASM, SGNA	Certificate of attendance





Category	Description of Activity	Number of Infection Prevention Units (IPUs)	Maximum Number of IPUs	Examples of Participating Providers	Required Documentation
Academic education	Enrolled in accredited programs that offer specific education that would advance the profession of infection prevention and control	10 IPUs per program completion 2 IPUs per year of enrollment	10 IPUs max	Certification in statistics, MPH, MSN, project management	Copy of completed program or course unofficial transcript, with institution name visible  OR  Copy of diploma, with institution name visible  OR  Verification document  Contains your name, the name of the college or institution, the name of course or program, the date and semester course or program was completed, a brief description, and the instructor signature
Publications	Peer reviewed journal only that are topics specific to infection prevention and control.	5 IPUs per publication	No max	AJIC, CJIC, ICHE, ASM	Copy of article, guidelines, prevention guide, or other publication, ensuring your participation as author or co-author, title of written work, date of publication, and a subject synopsis is visible
Tublications	Authoring/co- Authoring evidence- based guidelines, prevention guides, or similar publication related to the field of infection prevention and control.	5 IPUs per publication	No max	CDC, IHI, professional organization, APIC prevention guide	Copy of article, guidelines, prevention guide, or other publication, ensuring your participation as author or co-author, title of written work, date of publication, and a subject synopsis is visible

Category	Description of Activity	Number of Infection Prevention Units (IPUs)	Maximum Number of IPUs	Examples of Participating Providers	Required Documentation
Presentation	Speaking at chapter, state, and national conferences.  Delivering a webinar with a primary focus on infection prevention and control.	2 IPUs per one hour of presentation time	No max	APIC chapter, IPAC chapter, State HAI conference, IPAC Canada, APIC, SHEA	Letter or verification from conference organizer on official organization letterhead  Contains your name, the name of the webinar or presentation, the date of the webinar or presentation, and a synopsis of webinar or presentation focus  OR  Copy of brochure/flyer/ conference schedule indicating name of presenter, date/ time presented and presentation
	Primary author of an abstract presentation at a national conference	1 IPU per abstract	No max	APIC, IPAC Canada, SHEA, and IDSA	Copy of brochure/flyer/ conference schedule or abstract showing authorship OR Copy of first page of abstract



Category	Description of Activity	Number of Infection Prevention Units (IPUs)	Maximum Number of IPUs	Examples of Participating Providers	Required Documentation
Participation in a professional organization	Participate on a local, state, or national level as a committee member (particular role: treasurer, secretary)	5 IPUs per term per role	No max	Committees: County, state, national health Committees (if in a particular role)	Appointment letter on letterhead of organization or Board (separate letter for each role held)  Contains your name, your role held, the dates of term, and the signature from committee chair or organization leader/chapter President
	Elected position on a Board	5 IPUs per term per role	No max	APIC, SHEA, IDSA, IPAC Canada	Appointment letter on letterhead of organization or Board (separate letter for each role held)  Contains your name, your role held, the dates of term, and the signature from committee chair or organization leader/chapter President
Teaching	Teaching specific topics related to infection prevention and control for an accredited institution	1 IPU per hour of instruction	Max of 5 IPUs per recertifica- tion period	Nursing school, public health program	Copy of course or class syllabus outlining infection prevention teaching  AND  Verification letter (separate letter for each course or class)  Contains your name, the dates of course, the number of hours of instruction, the name of accredited institution, and the Signature from institution contact (examples: chancellor, professor, academic dean, President)



Category	Description of Activity	Number of Infection Prevention Units (IPUs)	Maximum Number of IPUs	Examples of Participating Providers	Required Documentation
	Involved in an approved local facility IRB, State, or federally funded research	5 IPUs per research activity	No max		A report ensuring your participation in the research and a subject synopsis is visible
Research	activity that is specific to advancing the profession of infection prevention and control (e.g. listed as a principal member of the investigational team)				Verification letter Contains your name, the dates of participation, your role in the research (examples: writer, investigator), and the source of funding

IPUs must cover at least six domains. "Domains" refers to the eight categories of the examination:

1. Identification of Infectious Disease Processes

5. Management and Communication

2. Surveillance and Epidemiologic Investigation

- 6. Education and Research
- 3. Preventing/Controlling the Transmission of Infectious Agents
- 7. Environment of Care

4. Employee/Occupational Health

8. Cleaning, Sterilization, Disinfection, Asepsis

The activities you participate in towards obtaining IPUs must relate to and align with at least six of those domains.

#### **Professional Portfolio Process**

To fill out your portfolio:

Go to www.cbic.org and proceed to https://cbic.execinc.com/edibo/RecertByCE.

For more information about the IPUs portfolio submission process, including screenshots of the online interactive system, please view the IPUs Portfolio Manual.

The cost of recertification by continuing education is \$375. Payment in U.S. dollars must be included with the official submission. Payment must be made by credit card only. The fee is non-refundable.

The entire portfolio review process can take up to 30 days from date of submission received. If you have not received notification within 30 days, please contact CBIC. A random sampling of portfolios will be chosen for audit every year, CBIC will contact you if you are chosen for an audit.

The recertification portfolio must be submitted by October 31 of the recertification year. There are no extensions to this deadline for any reason. If the portfolio is not submitted by October 31, the only method to obtain recertification is to purchase the CIC® recertification exam. This must be purchased by November 30 of the recertification year and completed by December 31. If you are selected for a random audit and your units are not accepted, you must take the proctored recertification exam, which must be purchased by December 18 and completed by December 31.

If the candidate has not passed an examination by their certification end date, they are considered lapsed and are no longer eligible to use the CIC® designation. They must submit a full application and payment for the initial certification examination, including proof that they meet the current eligibility requirements in the new year.

#### **CIC®** Recertification Schedule

Portfolio Submission	11:59 pm Greenwich Mean Time on October 31	
Recertification Exam Purchased	November 30	
Recertification Exam Completion	11:59 pm Greenwich Mean Time on December 31	