

AAPCC



2012
CSPI Exam Candidate
Handbook



2012 CSPI Exam Candidate Information Handbook

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*Part of the Application package that you mail to AAPCC, must contain forms I-K or I-L, if L is applicable.



January 2012

Dear 2012 CSPI Exam Candidate:

Congratulations on your decision to take the 2012 Exam Certification for Specialists in Poison Information (CSPI). Whether this is your first time taking the exam or are recertifying, you have demonstrated the desire to be a leader in the poison control field. Your dedication to excellence is commendable.

Please look through this CSPI Exam Candidate Handbook for all your information on this year's exam process.

Good luck as you prepare and take this year's exam. Your AAPCC Board of Directors and CSPI Exam Committee members salute your efforts. Also for the first time, we are offering a CSPI Exam Strategies Workshop as addition to candidate's study plans.

Here are some tips for preparing and taking the exam:

- Every question contains only one single right answer, three plausible but wrong answers and enough information to choose the correct answer.
- Read each question and all of the answers carefully so that you understand precisely what is being asked. As you read the question, consider each of the four answer choices and rule out the ones that you think are obviously wrong.
- Answer the question based only on the information given. Do not try to "read into" the question or add information that is not provided.
- Do not spend too much time on any one question. If you are not sure of your answer, try to narrow down your choices and pick the one you think is most likely correct. Mark the question for review. If you finish the test and have time left, go back and review those questions.
- All questions are written by poison center experts and are based on standard references.
- It is to your advantage to answer every question as your score is based on the total correct answers. A question left unanswered is scored as wrong.
- Use all the resources available to you, such as the exam topic list, study questions and objectives as you craft your study plan.

Please feel free to contact me via email or phone should you have additional questions.

Sincerely,

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C. UNDERSTANDING THE CSPI EXAM

Purpose: The Specialist in Poison Information (SPI) examination is to certify that the candidate has sufficient skill, knowledge, education, and experience to provide poison information to the public, healthcare providers, and public health agencies.

Preparation: Candidates should break studying into organized, manageable parts, with all available resources. Each resource is one component of the overall comprehensive study plan for the CSPI Exam. Please note that using these tools will not guarantee a successful outcome on the exam.

A competent candidate:

- Can work independently to provide appropriate information and knows when to ask for assistance.
- Can appropriately interpret information resources and apply that information.
- Can recall and apply basic information on common and/or important types of poisonings.

The exam is divided into ten content areas (sections) with specific objectives for each section:

1. History
2. Calculations
3. General principles of poison management
4. Biologicals
5. Chemicals, metals, and gases
6. Drugs
7. Household products
8. Pesticides
9. Toxidromes
10. Laboratory and ancillary testing

Skills Being Tested - Questions may require **Recall** and/or **Application Skills**.

1. **Recall** - Includes items that only require the examinee to remember or recognize specific facts, definitions or standard procedures.
2. **Problem Solving Clinical Scenario** - Includes items which require the examinee to apply factual knowledge to unfamiliar situations, to reason, to make evaluative judgments, or to solve clinical problems. These questions test application skills instead of recall.

Clinical scenarios usually contain a brief history with pertinent results from the physical exam and laboratory tests. This is followed by a question that tests the ability of the SPI to assess or manage the poisoning.

Suggested References*

- AAPCC patient management guidelines posted on the AAPCC website
- Clinical Management of Poisoning and Drug Overdose by Haddad, Shannon, & Winchester. W.B. Saunders Co., Philadelphia
- Clinical Toxicology by Ford. W.B. Saunders Co., Philadelphia, 2001
- Poisindex (Micromedex)
- Critical Care Toxicology by Brent, et al. Mosby, Philadelphia, 2005
- Goldfrank's Toxicologic Emergencies by Goldfrank. McGraw-Hill, New York, 2006
- Medical Toxicology by Dart. Lippincott Williams & Wilkins, Philadelphia, 2004
- Occupational, Industrial, and Environmental Toxicology by Greenberg et al. Mosby, Philadelphia, 2003
- Poisoning and Drug Overdose by Olson. McGraw-Hill, New York, 2007

*These are the latest versions at the time of this writing.

Section 1	History
1.1	Given an exposure in which the symptoms and signs do not support the original history, identify the causal agent(s).
1.2	Given an exposure, identify the potential toxicity based on route of exposure.
1.3	Identify the drugs with more significant toxicity in chronic exposure.
1.4	Identify plausible or implausible, age-appropriate exposure scenarios.
1.5	Given an exposure scenario (ingestion, ocular, dermal, or inhalation) , identify the questions that should be asked about the symptoms and signs.
1.6	Identify which substance will present with late onset of clinical symptoms.
1.7	Given a patient with specific symptoms who is taking a particular medication, identify what additional history should be obtained.
Section 2	Calculations
2.1	Given a patient exposed to an amount of a gel, liquid or cream in specific concentrations, calculate the ingested dose on an amount per weight dosage.
2.2	Given an exposure including a patient who has taken an unknown amount of a substance, determine the amount of substance that would need to be ingested to reach a defined toxic dose.
2.3	Given an exposure including a patient who has taken a known amount of a solid substance, calculate the amount ingested on an amount per weight dosage.
2.4	Convert units of measurement for common exposures.
Section 3	General Management Principles
3.1	Given an exposure, determine the appropriate disposition for the patient.
3.2	Identify the need for hemodialysis.
3.3	Given a patient with a wide QRS interval on the ECG, identify the appropriate treatment.
3.4	Given a seizing patient, identify the appropriate treatment.
3.5	Given a patient with a dystonic reaction, identify the appropriate treatment.
3.6	Identify the appropriate decontamination method for a given exposure (gastrointestinal, dermal, ocular, or inhalation)
3.7	Given an exposure, identify contraindicated therapy.
3.8	Identify expected adverse reactions and side effects of treatment.
3.9	Given an exposure, identify appropriate monitoring parameters.
Section 4	Biologicals
4.1	Given an exposure, identify which plant is responsible.
4.2	Given an exposure, identify which mushroom class is responsible.
4.3	Given an exposure, identify which food-borne illness is responsible.
4.4	Identify the toxicity and symptoms of a bite or sting from an insect or arthropod species indigenous to North America.
4.5	Identify the toxicity and symptoms of a bite from a snake species indigenous to North America.
4.6	Identify the toxicity and symptoms of food poisoning.
4.7	Identify the toxicity and symptoms of plant exposures.
4.8	Given a bite from a snake indigenous to North America, determine the appropriate treatment.
Section 5	Chemicals
5.1	Given an inhalation exposure, identify which substance is responsible.
5.2	Given an exposure with a cluster of patients, identify which chemical weapon of mass destruction is responsible.
5.3	Identify the toxicity and symptoms of chemical exposures.
5.4	Identify the toxicity and symptoms from exposure to gases.
5.5	Identify the toxicity and symptoms from carbon monoxide exposure.
5.6	Identify the toxicity and symptoms of exposure to heavy metals.
5.7	Given a dermal exposure to caustic chemicals, identify the appropriate treatment.
5.8	Given a cyanide exposure, identify the appropriate treatment.
Section 6	Drugs

6.1	Given an exposure, identify a drug that when ingested in small amounts is potentially life threatening for a particular patient.
6.2	Identify the toxicity and symptoms of exposure to analgesics including over-the-counter or prescription.
6.3	Identify the toxicity and symptoms of exposure to anticonvulsants.
6.4	Identify the toxicity and symptoms of exposure to non-cyclic antidepressants.
6.5	Identify the toxicity and symptoms of exposure to tricyclic antidepressants.
6.6	Identify the toxicity and symptoms of exposure to antimicrobials.
6.7	Identify the toxicity and symptoms of exposure to antipsychotic agents.
6.8	Identify the toxicity and symptoms of exposure to common antihypertensives.
6.9	Identify the toxicity and symptoms of exposure to beta blockers and calcium channel antagonists.
6.10	Identify the toxicity and symptoms of exposure to cardiac glycosides.
6.11	Identify the toxicity and symptoms of exposure to over-the-counter stimulants and weight-loss preparations.
6.12	Identify the toxicity and symptoms of exposure to antidiabetic agents.
6.13	Identify the toxicity and symptoms of exposure to thyroid drugs.
6.14	Identify the toxicity and symptoms of exposure to iron.
6.15	Identify the toxicity and symptoms of exposure to sedative hypnotics.
6.16	Identify the toxicity and symptoms of exposure to skeletal muscle relaxants.
6.17	Identify the toxicity and symptoms of exposure to amphetamines and related compounds.
6.18	Identify the toxicity and symptoms of exposure to cocaine.
6.19	Identify the toxicity and symptoms of exposure to street drugs.
6.20	Identify the toxicity and symptoms of exposure to over-the-counter topicals.
6.21	Identify the toxicity and symptoms of exposure to vitamins.
6.22	Given an exposure to a beta blocker or calcium channel blocker, identify the appropriate treatment.
6.23	Given a patient with an overdose of an antidiabetic medication, identify the appropriate treatment.
Section 7	Household products
7.1	Given an exposure, identify household products which may cause significant toxicity in small amounts.
7.2	Identify the toxicity and symptoms of exposure to ethanol and isopropyl alcohol.
7.3	Identify the toxicity and symptoms of exposure to ethylene glycol and methanol.
7.4	Identify the toxicity and symptoms of exposure to cleaning substances.
7.5	Identify the toxicity and symptoms of exposure to foreign bodies.
7.6	Identify the toxicity and symptoms of exposure to hydrocarbons.
7.7	Identify the toxicity and symptoms of hydrocarbon inhalant abuse.
7.8	Identify the toxicity and symptoms of exposure to tobacco products.
7.9	Identify the treatment for ethylene glycol or methanol poisoning.
Section 8	Pesticides
8.1	Given an exposure, identify the insecticide or herbicide that is potentially responsible.
8.2	Identify the toxicity and symptoms of exposure to carbamates and organophosphates.
8.3	Identify the toxicity and symptoms of exposure to insect repellents.
8.4	Given a pesticide exposure, identify the appropriate treatment.
8.5	Given a rodenticide exposure, identify the appropriate treatment.
Section 9	Toxidromes
9.1	Given an exposure, identify the sympathomimetic toxidrome or the causative agent.
9.2	Given an exposure, identify the cholinergic toxidrome or the causative agent.
9.3	Given an exposure, identify the anticholinergic toxidrome or the causative agent.
9.4	Given an exposure, identify the opioid toxidrome or the causative agent.
9.5	Given an exposure, identify the methemoglobinemia toxicologic syndrome or the causative agent.
9.6	Given a patient with sympathomimetic toxicity, identify the appropriate treatment.
9.7	Identify the treatment for methemoglobinemia.
Section 10	Labs and ancillary testing

10.1	Given abnormal blood gas results, identify the causative agent.
10.2	Given an exposure, calculate and interpret the anion gap, and identify the causative agent.
10.3	Given a patient with coagulopathy, identify the causative agent.
10.4	Given abnormal electrolytes, identify the causative agent.
10.5	Given results of a urine drug screen, identify potential false positive or false negatives.
10.6	Given a patient with a wide QRS interval on an ECG, identify causative agents.
10.7	Given an exposure, identify which lab or ancillary test(s) should be analyzed.



D. CSPI Exam Objectives—Updated November 2010 for 2012 CSPI Exam	
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E. AAPCC Specialist in Poison Information Certification Examination Topics

Updated 11/11/10 for 2012 CSPI Exam

This topic list will enable candidates to break studying into organized, manageable parts, which should be just one component of the comprehensive study plan for the CSPI Exam. They should also be used in conjunction with the CSPI Exam Objectives as well as other resources. Please note that using these tools will not guarantee a successful outcome on the exam.

1. **History** (see CSPI Exam objectives)
2. **Calculations** (see CSPI Exam objectives)
3. **General Management Principles** (see CSPI Exam objectives)
 - Emergency Management and Supportive Care
 - Decontamination
 - Activated Charcoal
 - Cathartics
 - Emesis
 - Lavage
 - Whole Bowel Irrigation
 - Dermal and Ocular Irrigation
 - Fresh Air and Oxygen
 - Appropriate and Inappropriate Application
 - Enhancement of Elimination
 - Alkalinization
 - Hemodialysis
 - Antidotes
 - Indications
 - Contraindications
 - Adverse Effects
 - Monitoring Parameters
4. **Biologicals** (see CSPI Exam objectives)
 - Bites, Stings, and Envenomations
 - Insect Stings (indigenous to North America)
 - Scorpion Stings (indigenous to North America)
 - Snake Bites (indigenous to North America)
 - Spider Bites (indigenous to North America)
 - Food Poisoning
 - Bacterial
 - Botulism
 - Ciguatera
 - Scombroid
 - Mushrooms
 - Coprine
 - Cyclopeptide
 - Gastrointestinal Irritants
 - Ibotenic Acid/Muscimol
 - Monomethylhydrazine
 - Muscarine
 - Psilocybin

- Plants
 - Anticholinergic
 - Cardiac glycosides
 - Gastrointestinal irritants
 - Hallucinogenic
 - Oxalate
 - Stimulants

5. Chemicals (see CSPI Exam objectives)

- Acids
- Alkali
- Chemical Weapons of Mass Destruction
 - Nerve Agents
 - Vesicant (Blistering) Agents
- Cyanide
- Fumes, Gases, and Vapors
 - Ammonia
 - Carbon Monoxide
 - Chloramine
 - Chlorine
 - Freon and Other Propellants
 - Fume Fevers (metal, polymer)
 - Hydrogen Sulfide
 - Phosgene
 - Simple Asphyxiants
- Metals
 - Arsenic
 - Lead
 - Mercury
- Nitrites and Nitrates

6. Drugs (see CSPI Exam objectives)

- Analgesics, Antipyretics and Anti-inflammatory Agents
 - Acetaminophen
 - Aspirin
 - Nonsteroidal Anti-Inflammatory Drugs
 - Opioids
 - Serotonin Receptor Agonists (i.e. sumatriptan)
 - Tramadol
- Anticholinergics
- Anticonvulsants
 - Carbamazepine
 - Lamotrigine
 - Levetiracetam
 - Phenytoin
 - Topiramate
 - Valproic Acid
- Antidepressants
 - Cyclic Antidepressants
 - Non-cyclic Antidepressants
 - Bupropion
 - Duloxetine
 - Lithium
 - Monoamine Oxidase Inhibitors

- Selective Serotonin Reuptake Inhibitors
 - Trazodone/Nefazodone
 - Venlafaxine
- Antihistamines
- Antimicrobials
 - Aminoglycosides
 - Cephalosporins
 - Isoniazid
 - Penicillins
- Antipsychotic Agents
 - Atypical Antipsychotics
 - Typical Antipsychotics
- Cardiovascular Agents
 - Antihypertensives
 - Alpha Adrenergic Blockers
 - Angiotensin Converting Enzyme Inhibitors
 - Angiotensin II Receptor Antagonists
 - Alpha-2 Adrenergic Receptor Agonists
 - Diuretics
 - Peripheral Vasodilators
 - Beta Adrenergic Blockers
 - Calcium Channel Blockers
 - Cardiac Glycosides
- Gastrointestinal Agents
 - Diphenoxylate/atropine
 - Loperamide
 - Metoclopramide
- Genitourinary Agents
 - Erectile Dysfunction Agents
 - Phenazopyridine
 - Urinary Antispasmodics
- Hormone and Hormone Antagonists
 - Antidiabetic Agents
 - Steroids
 - Thyroid Supplements
- Local Anesthetics
- Minerals and Electrolytes
 - Iron
 - Fluoride
 - Other Minerals
- Over-the-Counter Stimulants and Weight Loss Preparations
- Sedative, Hypnotics, and Antianxiety Agents
 - Barbiturates
 - Benzodiazepines
 - Buspirone
 - Chloral hydrate
 - Eszopiclone
- Skeletal Muscle Relaxants
 - Carisoprodol/Meprobamate
 - Cyclobenzaprine
 - Tizanidine
- Stimulants, Hallucinogens, and Street Drugs
 - Amphetamines and Related Compounds
 - Amyl and Butyl Nitrites

- Caffeine
- Cocaine
- Gamma Hydroxybutyric Acid and Related Compounds
- Heroin and Related Compounds
- LSD and Other Hallucinogens
- Marijuana and THC Analogs
- Phencyclidine and Derivatives
- Sympathomimetics
- Topicals and Over-the-Counter Medications
 - Antiseptics (i.e. mercurochrome, iodine)
 - Camphor, Methyl Salicylate, and Other Essential Oils
 - Cough, Cold and Antitussive Preparations
 - Imidazoline Decongestants
- Veterinary Medications
 - Anthelmintics (i.e. heartworm products)
 - Vaccines
- Vitamins
- Warfarin

7. Household Products (see CSPI Exam objectives)

- Adhesives, Glues, and Epoxy
- Alcohols and Glycols
 - Ethanol
 - Ethylene Glycol
 - Isopropyl Alcohol
 - Methanol
 - Other Glycols (i.e. glycol ethers, ethylene glycol monobutyl ether)
- Cleaning Substances
 - Bleaches
 - Disinfectants (i.e. iodine, phenol, pine oil)
 - Soaps, Detergents and Laundry Products
 - Anionic and Nonionic
 - Cationic (i.e. quaternary ammonium compounds)
 - Enzymatic
- Fertilizers and Plant Food
- Fire Extinguishers
- Foreign Bodies, Toys and Miscellaneous
 - Button Batteries
 - Coins
 - Holiday Hazards
 - Magnets
 - Sporting Equipment (i.e. gun bluing)
- Hydrocarbons
 - Aliphatic
 - Aromatic
 - Halogenated
 - Inhalant Abuse
 - Terpenes
- Hydrogen Peroxide
- Lacrimators (i.e. capsaicin)
- Moth Repellants
- Paint and Paint Strippers
- Personal Care Products
 - Cosmetics

- Dental Care
- Hair Care
- Mouthwashes
- Nail Care
- Perfumes, Colognes and After Shaves
- Powders (i.e., talc, other)
- Suntan and Sunscreen
- Tobacco Products

8. Pesticides (see CSPI Exam objectives)

- Borates and Boric Acid
- Carbamates
- Chlorinated Hydrocarbons (i.e. lindane)
- Herbicides
 - Chlorophenoxy Compounds
 - Glyphosate
 - Paraquat and Diquat
- Insect Repellants
- Organophosphates
- Pyrethrins, Pyrethroids and Piperonyl Butoxide
- Rodenticides
 - Anticoagulants
 - Non-anticoagulant Rodenticides
 - Phosphides
 - Vitamin D Analogs

9. Toxidromes (see CSPI Exam objectives)

10. Laboratory and Ancillary Testing (see CSPI Exam objectives)

F. AAPCC Certification Exam Extenuating Circumstances Policy

Extenuating circumstances, such as a serious illness or injury, death in immediate family, or natural disaster (i.e. severe flooding, hurricane or tornado), may prevent candidates from meeting the required examination and recertification timeline. **Examples of acceptable extenuating circumstances:**

- Serious illness or injury (includes complications of pre-existing medical conditions)
- Death in immediate family
- Court appearance or jury duty
- Military duty
- Weather emergency/Natural disaster

To request an extension, the following must be submitted to the certification manager:

- Written request for the extension, including a detailed description of the extenuating circumstances.
- For serious illness or injury, a letter from a licensed health care professional whose credentials are appropriate to diagnose and evaluate, must be included.

For known extenuating circumstances, an extension must be requested from the certification manager prior to the exam administration. In such cases, the candidate must take the exam the next time it is offered.

Severe Weather/Natural Disasters

In cases of severe weather or natural disasters, where the test site/area is temporarily inaccessible or unsafe, Pearson VUE will call candidates to reschedule. Candidates will have up to 10 business days after the exam window is closed to take the exam without penalty. If no site within 50 miles of the poison center is able to accommodate the candidate within the 10 business day window, an extension must be requested from the certification manager. In such cases, the candidate must take the exam the next time it is offered. Documentation of all extension requests and resulting actions/decisions will be retained by the certification manager.

Initial Certification

A non-certified candidate may be granted one approved extension for examination re-takes.

Recertification

A candidate may be given one extension in any seven-year certification cycle. A candidate unable to take the exam at the next sitting would no longer be certified and would revert to SPI status. However, the candidate could take the exam at the next available time, if eligible.

Stressful Situations

Changes will NOT be made to candidates' exam pass/fail status due to "stressful situations" (i.e. natural disaster, illness, family death) experienced by individuals prior to exam administration.

Returning SPIs/CSPIs

Please note that the final decision on whether or not a candidate may apply to take the exam is the responsibility of the center's managing and medical director.

- If a non-certified SPI (who has never taken the exam) leaves employment and later returns, he/she may (but is not required to) count prior calls and hours worked towards the exam eligibility requirements.
- If the returning SPI has previously taken and not passed the exam, he/she must re-qualify for exam eligibility and start over with hours worked and calls handled. The SPI can then take the exam three additional times. He/she would revert to Poison Information Provider status if the exam was not passed by the third time.
- CSPIs who leave employment at a center and then return, must take the exam seven years after their last certification date to maintain their certification. If former CSPIs return to employment within one year after their certification expiration date, they are eligible to take the exam the next time it is offered. Former CSPIs returning to employment after one year after their certification expiration must re-qualify according to initial requirements.

CSPI Exam Committee Members

CSPIs who are active members of the CSPI Exam Committee at the time they would normally be required to take the exam for recertification will maintain their certification status for two years after they discontinue committee membership. For example, if a CSPI committee member was originally required to take the exam in 2011 but served on the committee until 2012, he/she would not take the exam until 2014.

G. 2012 CSPI Exam FAQ's

What are the exam dates?	April 30-May 5, 2012
When is the application deadline to AAPCC?	April 9, 2012
When is the scheduling for a test site deadline with Pearson VUE?	April 23, 2012. It is in your best interest to call and select your test site ASAP after you receive your Registration Confirmation email from AAPCC.
What is Pearson VUE and Professional Testing Inc.?	Pearson VUE is AAPCC's test site contractor. Pearson will handle scheduling the exams in their test sites. Professional Testing is AAPCC's vendor to handle Pearson VUE matters.
Does Pearson VUE have a website?	Yes. www.vue.com . Click Test Takers Services then Click Certification for Specialists in Poison Information—CSPI/AAPCC under Select your Program . You may also see the test site choices on that page.
Where are the test sites?	Pearson VUE has over 5,000 test sites all over the world.
How much does the exam cost?	\$250 per applicant; multiple applicants can be on one check.
How do I pay for the exam?	Pay by check; one check can be written for multiple candidates.
When should I arrive for the exam?	30 minutes prior to your exam time. It would be to your advantage to make a test run before the exam date. If you arrive after your scheduled time, you may forfeit your chance to take the exam.
How do I register for the exam?	<p>For a complete list of steps, see Section H.</p> <p>Go to the Member section of www.aapcc.org. Click on 2012 CSPI Exam Information and Registration, then click on 2012 CSPI Candidate Exam Registration. Complete pages 1-2 of the application and submit those two pages electronically.</p> <p>After electronically submitting pages 1-2, print pages you will need to print pages 1-6, and complete pages 3-6. Mail your completed application package to AAPCC by April 9, 2012.</p> <p><u>New applicants:</u></p> <ol style="list-style-type: none"> 1. Application Package, 6 pages 2. Copy of nursing, physician assistant, pharmacy or medical license or diploma 3. Documentation of number of hours spent answering calls 4. \$250 application fee per candidate, payable to AAPCC <p><u>Recertifiers:</u></p> <ol style="list-style-type: none"> 1. Application Package, 6 pages 2. \$250 application fee per candidate, payable to AAPCC
Do I have to electronically submit only part of my application?	Yes. We will be using the data that you electronically submit to provide detailed post exam statistical information.
How do I schedule a test site and time with Pearson VUE?	After electronically submitting the first two pages of the application and mailing in pages 1-6 of the application, you will receive a Confirmation Email from AAPCC that your application package has been verified. The Confirmation Email will have the phone number for you to call Pearson VUE to schedule your test. Please do so ASAP.
How is the exam administered?	Via computer (PC). See Section M for a sample screenshot of the exam question format.
What is the cancellation and reschedule policy?	You have 72 hours before the day of the exam to cancel or change your registration. There are no refunds after that time.
How long do I have to take the exam?	You have up to four hours to take the exam.

<p>How many questions are on the exam?</p>	<p>160 questions but your score will be based on 125 questions. The other 35 questions may be used on future exams.</p>
<p>Will I be able to make comments on a question?</p>	<p>Yes. There will be a “Make Comments” feature for each question. Please note this will count towards the 4 hour time limit. Your comments will be forwarded to the Exam Committee for review.</p>
<p>When will I receive my results?</p>	<p>Please allow 6-8 weeks to receive your results via the email address you put on your application.</p>
<p>Can I go back and review/change an answer?</p>	<p>Yes. You may go back to review/change your answers. There is also a “Mark Item for Review” feature. Please note that this will count towards the 4 hour time limit. See Section M for a screenshot of the question format.</p>
<p>What if I require special accommodations in accordance with the American with Disabilities Act (ADA)?</p>	<p>Complete the Request of Special Accommodations Form in Section L and return with your Application Package.</p>
<p>What needs to be included with my completed application?</p>	<p>In addition to your signed application (Pages 1-6), your supporting documents such as a copy of your license and call log, the signed Exam Agreement, fee and, if applicable, the ADA Special Accommodations Form.</p>
<p>I have test anxiety and am really nervous about the test. What should I do?</p>	<p>Join the crowd! Everyone has at least some test anxiety. It’s all how you harness yours. Take some deep breaths. Feel free to call Leslie Sandler at 703-894-1862 to chat with you about some tips in dealing with testing matters.</p>
<p>What should I bring to the test site with me?</p>	<p>Candidates are to provide two forms of valid ID, one primary with a photo and a signature, one secondary with a signature. Expired ID’s are not accepted.</p> <p>Primary:</p> <ul style="list-style-type: none"> • Gov’t issued driver’s license • State/national ID card • Passport or US Passport Card • Military ID • Alien registration card(green card, permanent resident visa) • US Dept of State Driver’s License <p>The primary ID must contain a photo and signature unless the signature is embedded in the identification. When this occurs, candidates must present another form of signature identification from the primary or secondary list.</p> <p>Secondary:</p> <ul style="list-style-type: none"> • Any ID on the primary list • Signed Social Security Card • Signed credit/bank ATM card <p>▪ Basic, four-function, non-programmable calculator</p>
<p>Can I take a general computer testing tutorial?</p>	<p>Yes. Go to www.vue.com. Click Test Takers Services then Click Certification for Specialists in Poison Information—CSPI/AAPCC under Select your Program. On the CSPI Exam page, Click Computer-Based Testing Tutorial.</p>

Besides the two forms of identification, are there other security measures at the test site?	Yes. At some test sites, candidates will be required to put their palm in a scanner for a palm imprint and/or a picture is taken. This is done for security identification purposes.
What are the most common reasons for failing the exam?	Failure to properly prepare and read questions carefully are the most common reasons. Other reasons include failure to follow instructions, correctly analyze the questions and/or allocate time properly.
Can I have my exam returned to me after it is scored?	No. Exams are not returned to and reviews of exam and grading materials are not permitted. Exam materials are stored securely for three years and are then destroyed.
Can you tell me specifically which questions I did not get correct?	No, but you will receive a score report that details how you did in each of the curricular areas as noted in the Exam Objectives.
How is the examination developed?	AAPCC works with a professional testing company that specializes in the development, administration and scoring of certification exams. AAPCC carefully documents each step in the test-development process. Multiple reviews by subject-matter and testing experts strengthen the validity of the exam. Continuous evaluation of the exams quality and reliability maintains the validity as a measure of knowledge in toxicology.
What is covered on the exam?	The exam covers a broad range of knowledge and skills that SPI's use in their daily practice.
How often does AAPCC update its examination?	Annually. There are new questions for each exam. The underlying blueprint of subject areas covered on the exam is updated approximately every three-five years to reflect changes in poison control practice.
Can an inexperienced SPI pass the exam without preparation?	It is highly unlikely a first time CSPI Exam candidate will be able to pass the exam without the proper preparation. It is possible, but preparation is always recommended. The exam may cover subject areas that you are not exposed to in your daily practice.
Will I be able to use scratch paper while I am taking the exam?	At most test sites, candidates will use erasable white boards. Only one white board can be used at a time. When one is filled, it must be turned in for another one.

H. 2012 CSPI Exam Registration/Scheduling Steps

1. Request a 2012 CSPI Exam Candidate Handbook from Leslie Sandler at sandler@aapcc.org if you do not have one already. If you have already received the Candidate Handbook, please skip to Step 2.
2. Go to www.aapcc.org.
3. Click on **MEMBERS** at the top of the page.
4. Login with your pre-existing AAPCC user name and password to access member's only section **OR** register by clicking **Register** and completing the required items. Then click on **Register** at the bottom of the page.
5. Click on: **2012 CSPI EXAM INFORMATION AND REGISTRATION**
6. Click on: **2012 CSPI CANDIDATE EXAM REGISTRATION** containing information you need for registration.
7. Complete Page 1 of the Application, your signature is only required when you mail to AAPCC.
8. Complete Page 2, the Preparation Survey, then click **Submit** on the bottom of the page
9. Print the entire Application Package, Pages 1-6. (Note: Pages 1 and 2 will reflect the information you provided in Steps 7 and 8.)
10. Complete pages 3-6 of the application by entering your responses (typing or writing).
11. Mail the entire 2012 CSPI Exam Application Package by **April 9, 2012**(Pages 1-6), appropriate documentation, fee and if applicable, 2012 ADA Request for Special Accommodation Form to:

AAPCC
515 King Street, Suite 510
Alexandria, VA 22314
ATT: Leslie Sandler, M.Ed.
Certification Manager

12. Wait for Confirmation Email from AAPCC that will confirm you have:
 - A. Electronically submitted Pages 1-2 of the Application
 - B. Completed Pages 3-6 of the Application
 - C. Attached appropriate documentation
 - D. Included correct fees
 - E. Submitted an ADA form, if applicable
13. After receiving Confirmation Email from AAPCC with scheduling instructions, call Pearson VUE to schedule test.
14. After calling Pearson to schedule your test, Pearson will email to you a schedule confirmation with your name, exam time/date/location.



I. April 30-May 5, 2012 APPLICATION

EXAM CERTIFICATION FOR SPECIALISTS IN POISON INFORMATION (Page 1 of 6)
This Page MUST BE SUBMITTED ONLINE(www.aapcc.org) and then mailed in to AAPCC

Be sure that all sections are complete and the signatures are included in the mailed package. Enclose the application fee of \$250 payable to the AAPCC. **First time exam takers** should enclose **all** required documentation, including a photocopy of your nursing, physician assistant, pharmacy or medical license or diploma. After completing pages 1 and 2, press **submit** button. Then, print pages 1-6 of the application package and complete.

After electronically submitting pages 1 and 2 only, and printing the rest of the application package, mail the entire **6-page package and fee** to the AAPCC office c/o Leslie Sandler, certification manager, 515 King Street, Suite 510, Alexandria, VA 22314. Once your application has been approved, you will receive an email from AAPCC allowing you move on to the scheduling/test site selection process through Pearson VUE, AAPCC's scheduling/test site contractor. The application package has a total of 6 pages plus documentation.

Are you currently employed as a specialist in poison information in a poison center? <input type="checkbox"/> Yes <input type="checkbox"/> No	If you answered " No " you are not eligible to take the exam.
1) Name (as you would like it to appear on your certificate):	Poison Center Contact Email:
2) If you have taken this exam under another name, list name and year(s) taken:	Poison Contact Phone:
3) Poison Center:	Poison Center Contact Address:
4) Indicate your educational background: <input type="checkbox"/> RN Diploma <input type="checkbox"/> Pharmacist BS <input type="checkbox"/> RN AA <input type="checkbox"/> Pharmacist PharmD <input type="checkbox"/> RN BSN <input type="checkbox"/> MD <input type="checkbox"/> Licensed Physician Assistant Other _____	5) Are you renewing your certification? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes , sign below and then skip to section labeled Poison Center Director & Medical Director Recommendation on the bottom of page 3 Year of initial certification _____ If No , have you taken the exam in prior years? <input type="checkbox"/> Yes <input type="checkbox"/> No What year(s)? _____ 2009 _____ 2010 _____ 2011 Other _____
6) What shift hours do you usually(mostly) work? <input type="checkbox"/> Day <input type="checkbox"/> Evening <input type="checkbox"/> Night <input type="checkbox"/> Not sure	

INITIAL CERTIFICATION ONLY – Documentation of Number of Hours Spent Answering Calls

7) How many hours per week do you work?	
8) How many total weeks will you have worked as of 4/9/12?	
9) Do you have any other duties in addition to answering the phones? If no, enter 1.0. If yes, enter the fraction of time spent on the phones.	
10) Multiply the numbers entered in 7), 8) and 9) and enter the result:	

If the result in 10) is less than 2,000, you are not eligible to sit for the 2012 exam. If the total number is 2,000 or more, see your director regarding call volume documentation and recommendation for certification.

I verify that all the information listed above is correct. I understand that a copy of my examination results will be sent to the director of the poison center where I am employed and that if I appeal to have my examination rescored, a copy of the new report will be sent to my center director.

Applicant Signature: _____ **Date:** _____ **PAGE 1 of 3**

I. AAPCC May 2012 CSPI Exam (Page 2 of 3)
PREPARATION SURVEY

This page MUST BE SUBMITTED ONLINE(www.aapcc.org) and then mailed in to AAPCC

1. Describe your center's approach to preparing for the exam.

A. Formal education or training (example: My supervisor requires me to undergo certain types of exam preparation and designates time in my schedule to do so.)

B. Informal education or training (example: My supervisor encourages me to prepare with colleagues or study on my own time. I am not given any specific center training sessions for exam preparation.)

Comments:

2. Activities that will be completed prior to exam:

a. Review of CSPI Exam Topics

A. Yes

B. No

C. N/A

b. Participate in Exam Strategies Conference Call

A. Yes

B. No

C. N/A

f. Review of CSPI Exam Study Questions

A. Yes

B. No

C. N/A

c. Make study sheets from reading and lecture notes

A. Yes

B. No

C. N/A

g. Review CSPI Exam Objectives

A. Yes

B. No

C. N/A

d. Attend exam study sessions sponsored by my center (if applicable)

A. Yes

B. No

C. N/A

e. Attend monthly toxicology education sessions held at my center throughout the year (if applicable)

A. Yes

B. No

C. N/A

h. Other _____

3. How many hours do you anticipate studying for the exam? _____

4. When do you anticipate starting to study for the exam (month/year)? _____

I. THIS PAGE TO BE COMPLETED BY THE POISON CENTER DIRECTOR (Page 3 of 3)

This page must be mailed in to AAPCC

Before answering the following questions, please review the portion of the application completed by the applicant and verify that the information is correct.

INITIAL CERTIFICATION ONLY - Documentation of Number of Cases Handled by Applicant
PREFERRED METHOD: SUBMIT A PHOTOCOPY OF YOUR CENTER'S ANNUAL CALL VOLUME STATISTICS. IT MUST INCLUDE THE NUMBER OF CALLS RECEIVED BY THE EXAM CANDIDATE.

11) What was the poison center's human exposure call volume for 2011?

12) Total number of calls received by applicant

13) Does the number above include information calls?

If yes, enter the number of human exposure calls handled by applicant.

ALTERNATIVE METHOD:

14) What is the average call rate (human exposures) per hour during the shift this applicant works?

15) How many people work during this shift?

16) Divide the average call rate by the number of people working during the shift.

17) Enter the total number of hours spent answering phones from 9 on page 1).

18) Multiply the numbers entered in 16) and 17). This is the total number of cases handled.

If the total number of cases handled by the applicant through April 9, 2012 is less than 2,000, the applicant is not eligible to sit for the certification exam.

If the total number of cases handled by the applicant through April 9, 2012 is 2,000 or more and the applicant has worked 2,000 hours or more, the applicant is eligible to sit for the certification examination. **Please sign the following recommendation and submit this application, along with supporting documents and payment, no later than April 9, 2012.**

Poison Center Director & Medical Director Recommendation

I have reviewed this application and certify that the information is correct and that the applicant meets all the requirements for certification as a Specialist in Poison Information set forth by the American Association of Poison Control Centers. I recommend this applicant for certification and believe that the candidate is a competent Specialist in Poison Information.

Managing Director's Signature & Date

Medical Director's Signature & Date

Managing Director's Name (please print)

Medical Director's Name (please print)

Managing Director's Phone and Email

Medical Director's Phone and Email

J. 2012 CSPI Exam Agreement Form

This page must be mailed in to AAPCC

Compliance Agreement:

_____ I acknowledge that I have read this application and procedures. I understand and agree that if I am granted the CSPI designation, it will be my responsibility to remain in compliance with AAPCC's policies. I understand that CSPI designation has a seven-year certification cycle and that, if I wish to maintain my certification, it is my responsibility to maintain valid certification status by complying with recertification requirements. It is my responsibility to keep my certification current. I will notify AAPCC of any contact information changes.

Completing the Exam Application Package and Registration Process:

_____ I will complete my name as I would like it to appear on my certificate. All application packages must be complete with Application/documentation, Process Agreement Form, fee and if applicable the ADA Accommodation Form. Incomplete packages may jeopardize my being able to sit for the 2012 test. I understand that I have not completed the registration process until I have received a **Registration Confirmation email** from AAPCC giving me permission to schedule my test with Pearson VUE. I also understand that I have not completed the scheduling process until I receive a **Scheduling Confirmation email** from Pearson VUE, AAPCC's scheduling/test site contractor.

Release of Candidate Scores

_____ I understand and agree that my exam scores will be released to my director where I am employed when they are available.

Application Information Verification:

_____ I understand that AAPCC reserves the right to verify any or all information on this application and that any incorrect or misleading information may constitute grounds for rejection of my application, revocation of my certification, forfeiture of my fee, or other disciplinary action. I authorize AAPCC, its officers, directors, employees, agents, and assigned examiners (the "designated parties") to review my application to determine whether I have met AAPCC's standards for certification.

_____ I agree to cooperate promptly and fully in any review of my certification by AAPCC, including submitting such documentation and information deemed necessary to confirm the information in my application. I indemnify and hold harmless AAPCC and its designated parties from the decision made on my application so long as such decision was made in good faith and does not constitute gross negligence by AAPCC or its designated parties.

_____ I understand and agree that AAPCC may deny my eligibility to take the CSPI certification exam if any part of my application is incomplete or illegible, documented information does not meet the necessary point requirements, or the application does not include the correct fees.

ADA Accommodations:

_____ I understand it is my responsibility to request any special accommodations I may require through AAPCC prior to scheduling my test session. The Special Accommodation Form must be completed by my health care professional (MD, DO, etc.) **not** the Medical Director at my center. I understand that some special accommodations may require an additional fee.

J. 2012 CSPI Exam Agreement Form (con't)

This page must be mailed in to AAPCC

The Day of the Exam:

_____ I understand that I am to report to the testing location at least 30 minutes prior to the examination starting time. I understand and agree that I may not be permitted to enter the testing area if I arrive late for the examination. If I arrive late and am permitted to enter the testing area, I will not be granted additional time to complete the exam. It is recommended that I do a "test run" to the site before the exam so that I know where the building and room are located and as well as the parking arrangements. I will bring the appropriate two forms of identification. Scrap paper/white boards will be provided for me. I am allowed to bring a basic four function, nonprogrammable calculator into the test site. If the test site administrator tells me calculators are not permitted, **I will ask him or her to contact the Pearson VUE Call Center Hotline for clarification of this policy before I take the exam.**

Fraudulent Activities:

_____ No part of this examination may be reproduced in part or whole by any means whatsoever, including memorization. AAPCC reserves the right to take action against any candidate involved in fraudulent activities, including, but not limited to, discussing exam questions, cheating on an exam, alteration of score reports, alteration of completion certificates, violation of exam retake policies or other activities deemed fraudulent by AAPCC. My participation in any irregularity occurring during this examination, such as giving or obtaining unauthorized information or aid, as evidenced by observation or subsequent statistical analysis, may be sufficient cause to terminate my participation, invalidate the results of my examination, or take other appropriate action.

_____ If AAPCC determines, in its sole discretion, that fraudulent activity has taken place, it reserves the right to take action up to and including, but not limited to, decertification of a candidate's credentials; temporary, indefinite or permanent ban of a candidate from AAPCC certification programs; notification to a candidate's employer; and notification to law enforcement agencies. Candidates found committing fraudulent activities forfeit all fees previously paid to AAPCC, and may be required to pay additional fees for services rendered.

No Shows-Cancellations- Late to Test Site Refund Policies:

_____ I understand I cannot reschedule or cancel my scheduled test session with less than 72 hours notice and rescheduling or cancelling will require contacting Pearson VUE and AAPCC. I understand that if I do reschedule or cancel my registration with less than 72 hours notice no refunds will be made. I understand that fees cannot be carried over from one year to the next. I also understand that if I arrive to the test site after my scheduled starting time, I may not be able to take the exam.

Appeal Process:

_____ I understand that if I wish to have my application or examination scores formally appealed, I must make a written request for an appeal to AAPCC by a traceable mail service within 30 days of receiving notice regarding my application or examination. If I fail to provide such written notice, I waive all further claims for an appeal.

Initials:

_____ All paragraphs must be initialed.

Signed _____ Date _____

K. 2012 CSPI Application Package Checklist

This page must be mailed in to AAPCC

Name _____ Date _____

Phone _____ Email _____

Item	Candidate Check-off	AAPCC Verification
I have handled at least 2000 cases through April 9, 2012 and have worked at least 2000 hours.		
I have completed the 2012 Application, electronically submitted pages 1-2, printed pages 1-6 and completed pages 3-6.		
If I am not recertifying, I have included a copy of my nursing, physician assistant, pharmacy or medical license or diploma.		
If I am not recertifying, I have included documentation of the number of hours spent answering calls and my center director and medical director have signed page 3.		
If I am recertifying, my Poison Center Director and Medical Director have signed page 3 of the application.		
I have included the Exam Agreement Form, Section J.		
If I am requesting special accommodations in compliance with the ADA, I have contacted Leslie Sandler to ask for the Request for Special Accommodations Form.		
I have included a check for the \$250 application fee, or one check for multiple application fees.		
<p>After electronically submitting pages 1-2, printing pages 1-6, and completing pages 3-6, I will mail to AAPCC by April 9, 2012 my completed Application Package:</p> <p><u>New applicants:</u></p> <ol style="list-style-type: none"> 1. Application Package, 6 pages 2. Copy of my nursing, physician assistant, pharmacy or medical license or diploma 3. Documentation of number of hours spent answering calls 4. \$250 application fee per candidate, payable to AAPCC <p><u>Recertifyers:</u></p> <ol style="list-style-type: none"> 1. Application Package, 6 pages 2. \$250 application fee per candidate, payable to AAPCC 		
<p>I understand that only after I have electronically submitted pages 1 and 2 of the application and my completed application package is received by AAPCC will I receive a confirmation email to continue the scheduling/test site process through Pearson VUE, AAPCC's scheduling/test site contractor.</p>		

L. 2012 CSPI Exam Request for Special Accommodations (If applicable, this page must be mailed in)

In compliance with the Americans with Disabilities Act (ADA), AAPCC makes reasonable special testing arrangements for candidates with professionally diagnosed disabilities that are taking the AAPCC CSPI Examination.

Under the ADA, a disability is defined as “a physical or mental impairment that substantially limits one or more major life activities.” Examples of major life activities:

- Caring for one’s self
- Performing manual tasks
- Walking
- Seeing
- Breathing
- Learning
- Working

In order to request special testing accommodations for the AAPCC CSPI examination, candidates must have a documented disability as defined by the ADA. Generally, pregnancy, computer anxiety and test anxiety are not covered disabilities under the ADA. English as a second language is not covered by ADA

Persons with transitory or temporary conditions (for example, sprains, fractures, and medical emergencies) who desire accommodations should contact AAPCC as soon as possible before an exam for information about possible special

Special testing arrangements may include, but are not limited to, the need to bring medical devices (i.e. cane, insulin pump, sling, brace, etc.) into the testing room.

Pregnancy is not considered to be a disability. However, if the candidate is experiencing a resulting medical complication, special accommodations may be considered. While AAPCC is not required by the ADA to accommodate transitory or temporary conditions, accommodations for candidates with such conditions will be considered on a case-by-case basis. All special accommodation forms and related documentation are confidential and will not be released without the written consent of the candidate.

Knowing What to Request:

You and your health care professional should consult and agree on what accommodation(s) will best meet your testing needs. The professional should make reasonable testing accommodation recommendations based on: a professional understanding of, and familiarity with, your disability; its impact on a major life activity; and its impact on your current ability to test under AAPCC’s standard testing conditions. Recommendations should be reasonable and appropriate for your documented disability, and should not fundamentally alter the measurement of the knowledge and skills that the examination is intended to assess.

Recommendations for accommodation and any history of accommodations are considered. However, history of accommodations does not guarantee these same accommodations on the AAPCC Examination.

L. 2012 CSPI Exam Request for Special Accommodations(con't)

Documentation Requirements:

It is the responsibility of the candidate to ensure that all required forms and supporting documentation are submitted to AAPCC. A request for special testing accommodations will not be reviewed until all documentation is received.

Required documentation includes:

- A completed *Request for Special Accommodations* form. This form consists of two sections—one to be completed by the candidate, and one to be completed by the healthcare professional.
- Evaluation of the candidate's disability, to be completed by the healthcare professional. Note: The healthcare professional must be a licensed or otherwise, qualified practitioner whose credentials are appropriate to diagnose and evaluate the specific disability, this can not be your Medical Director. Candidates requesting accommodations for learning disorders or mental disabilities must be diagnosed by a psychiatrist, psychologist, or other professional with a minimum of a Masters degree, with credentials recognized as competent to diagnose a mental disorder or learning disability. If the candidate did not receive special accommodations during his/her years of higher education, a written explanation of why accommodations are being requested now is required. This is completed by the healthcare professional.

L. Request for Special Accommodations Form - Section 1

Name: _____
Title: _____
Center: _____
Address: _____
City: _____ State: _____ Zip/Postal Code: _____
Phone: _____
Email Address: _____

Requests for Special Accommodations MUST be received no later than 30 days in advance of the start of the testing window.

Please describe your disability: _____

Date disability was diagnosed: _____

Please list any previous accommodations received and the date(s):

I understand that AAPCC will use the information obtained by this authorization to determine eligibility for a reasonable accommodation concerning the AAPCC Examination, due to my disability. I understand that AAPCC reserves the right to make additional inquiries regarding my disability and previous accommodations before making a determination as to whether to provide the accommodations I have requested above. Under penalty of perjury, I declare that the foregoing statements, and those in any required accompanying documents or statements, are true. I understand that false information may be cause for denial or revocation of certification. I hereby certify that I personally completed the above form, that I may be asked to verify this information at any time and that there may be an additional charge for the accommodation.

Candidate Signature: _____ Date _____

I hereby authorize and request the health care professional identified below to release the information requested by AAPCC relating to my disability and the accommodation appropriate to my disability to sit for the AAPCC examination.

Candidate Signature: _____ Date: _____

L. Request for Special Accommodations Form – Section 2

Dear Healthcare Professional: The individual identified above (Page 3 of 5) is requesting accommodation to sit for the American Association of Poison Control Centers (AAPCC) Certification Examination. AAPCC policy requires that candidates requesting special testing accommodation submit current documentation of the disability from an individual qualified to assess the disability. The individual listed above is requesting that you provide such documentation.

The following must be completed by you:

- The remainder of this form (Section 2)
- An evaluation, on professional letterhead, that includes the following information (*if submitting an existing report, it must have been written within the past 5 years*):
 - Confirmation of diagnosis and functional impairment
 - Date (month/day/year) of first consultation
 - Date (month/day/year) the individual was last seen by you
 - Diagnosis, summary history, and course of the disability
 - Individual's current functioning and limitations in *major life activities*
 - For learning disabilities or mental disorders, the DSM classification of the diagnosis (Diagnostic and Statistical Manual of Mental Disorders–IV TR). *Notes:* DSM classification does not guarantee classification as a disability under ADA, and therefore, does not guarantee accommodation by AAPCC; AAPCC will not accept a diagnosis of Learning Disorder that was made before the individual was 18 years old, if the last diagnosis date is more than 3 years old.
 - Diagnostic tests administered, scores, and interpretation of scores.
 - Confirmation of treatment
 - Name and title of the professional
 - Duration of treatment
 - Outcomes of treatment
 - Recommended Accommodation
 - The healthcare provider's *specific* recommendation for accommodation(s) that directly relates to the impairment, and is supported by functional information in the evaluation. The file is considered incomplete if this specific recommendation is not included.
 - If the individual did not receive any special accommodations during years of higher education, please provide a written explanation for why accommodation is now being requested for this examination. This should be on a separate page and attached to this form.

Healthcare Professional: Please enclose this form and supporting documentation in one envelope, and mail to: AAPCC, Attn: Leslie J. Sandler, M.Ed. Certification Manager, 515 King Street, Suite 510 Alexandria, VA 22314

L. Request for Special Accommodations Form - Section 2 (con't)

Name: _____

Title/Occupation: _____

Address: _____

City: _____ State: _____ Zip/Postal Code: _____

Phone: _____

Fax: _____

Are you licensed/certified in an area that allows you to diagnose the disability?

Yes No

If yes, please provide your:

Jurisdiction: _____

License/Certification Number: _____

If no, please identify the credentials that allow you to diagnose the disability:

Please read and sign the following declaration:

I hereby certify that the above information is true and is given pursuant to the authorization to release information by my patient. Under penalty of perjury, I declare that forgoing statements and those in any required accompanying documentation are true.

I hereby certify that I personally completed Section 2 of this form, and that I may be asked to verify the above information at any time.

Signature: _____

Print Name: _____ Date: _____

M. 2012 CSPI Exam Screenshot of Question Format

image001 - Windows Picture and Fax Viewer

Pearson VUE Tutorial and Practice Exam - Candidate Name

Time Remaining 14:51
1 of 9

Elig for Review

What is a common after school snack in England?

- A. Peanut butter and jelly sandwich
- B. Toast with leftovers from the night before
- C. Egg roll
- D. Chocolate candy bar

Help Navigator Next

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