



Candidate Handbook for The Certified Biopharmaceutical Representative Examination

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Testing Windows and Application Dates*

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INTRODUCTION

Medical Representatives Certification Commission (MRCC) is a not-for-profit certification organization established to provide certification programs for medical representatives who have contact with clinicians in order to discuss their pharmaceutical, biotechnology, medical device, or diagnostic products. MRCC is governed by a volunteer board of commissioners comprised of national healthcare leaders. MRCC's certification programs will benefit patients, the healthcare community, and certificants' employers by providing well-researched standards of competency and ethical conduct and a continuously updated process of examination to ensure certificants meet those standards. For medical representatives, recognition by a third party enhances the credibility and reputation of certified professionals.

Medical representatives have primary responsibility for consulting with healthcare professionals and communicating the appropriate use and prescription of products for patient care. Medical representatives must provide accurate, balanced information (e.g., clinical trials, safety, efficacy, tolerability), consistent with laws and regulations. Adherence to high ethical standards throughout all interactions with healthcare professionals, their patients, and other stakeholders is essential.

By setting the standard for professional and ethical competency for medical sales representatives, MRCC seeks to protect the public and improve patient outcomes by ensuring certified professionals bring appropriate resources and information to practitioners to assist them in making the best possible prescribing decisions. Those who achieve certification will have demonstrated mastery of core knowledge and commitment to ethics that will help them become a more valued partner in the delivery of care to patients.

MRCC contracted with Castle Worldwide to develop and deliver the certification examination. Castle is a full-service testing company providing licensure, certification, and specialty examinations, including practical and simulation tests, for associations, state boards, government agencies, and corporations. Candidates communicate with Castle to apply for and sit for the Certified Biopharmaceutical Representative Examination. Upon passing the examination, certificants earn the designation of MRCC – Certified Biopharmaceutical Representative.

Please use this Candidate Handbook to understand our processes of application and registration. If you have questions about the processes described here, please contact Castle at 919-572-6880 or ibt@castleworldwide.com.

For more information regarding Medical Representatives Certification Commission, please visit www.mrcccommission.org or contact us at info@mrcccommission.org or 540-725-3838.

ELIGIBILITY

To be eligible to sit for the Certified Biopharmaceutical Representative Examination, a candidate must meet, and record within the application, the following criteria:

Initial Eligibility

Option 1: A baccalaureate degree granted by a United States regionally accredited college/university or foreign equivalent*, AND at least six months of employment in the medical representative or related role (e.g. sales representative, manager, training).

*Applicants with foreign degrees must obtain United States Equivalency Analysis through one of the following organizations:

- American Association of Collegiate Registrars and Admissions Officers (www.aacrao.org)
- Academic Credentials Evaluation Institute, Inc. (www.acei1.com)

This analysis must be submitted with your application. If you have a foreign degree, please complete a paper application and mail the paper application along with the equivalency analysis to the address noted on the application.

Option 2: At least two years of related experience working as a medical representative and/or managing, educating, or training medical representatives.

APPLICATION

Fees

The application fee for all candidates is \$350. The application fee includes the processing of the application, one year of testing eligibility, and one testing appointment. If the candidate does not take the examination within a 366-day period, then the application is closed and the candidate must reapply and pay the application fee again.

The fee must be paid in U.S. funds to Castle Worldwide, Inc. If paying online, the use of a credit card is required. Castle accepts Visa, MasterCard, American Express, money orders, corporate checks, or cashier's checks. Personal checks will not be accepted. The application fee is not refundable.

Process

Applications must be submitted and accepted prior to examination registration. Note that the examination is computer-based and offered only through Castle's approved, proctored testing centers.

Applications are accepted on a continual basis. The examination is offered during one-month windows following the application's approval. Please note that your application must be completed at least 45 days prior to the opening of the testing window. Late applications are accepted up to 30 days prior to the opening of the testing window for an additional fee of \$75. The testing appointment must be made at least seven days prior to the test date during the scheduled testing window.

Paper Applications

Applications submitted by mail must have all requested information or they will be considered incomplete. If a mailed application is incomplete, Castle will contact the applicant by e-mail, specifying the missing information. The applicant will have 90 days to submit the necessary information so the application can be processed. If the applicant does not complete the application within 90 days, the application will be closed, and Castle will issue a refund (minus \$75 for processing and administration). The applicant will have to apply and pay again in order to take the examination.

Deadlines

Candidates are strongly encouraged to complete their applications at least 60 days prior to the opening of the preferred testing window. Candidates can only schedule appointments to sit for an examination for the next available testing window.

Currently, applications must be received 45 days prior to the start of the testing window. Late applications (including the late application fee) must be received 30 days prior to the start of the testing window. Application deadlines and testing windows are noted on the front of this publication and included in the paper application.

Application, Examination Registration, and Testing Process

1. Review this Candidate Handbook prior to completing the application. Failure to follow the instructions can lead to the denial of an application. For questions regarding the application process, please contact Castle at 919-572-6880 or ibt@castleworldwide.com.
2. Review the eligibility requirements. DO NOT submit an application unless you can document that you have satisfied all eligibility requirements. Incomplete applications will not be processed.
3. Complete and submit the application and application fee. The application can be completed through the MRCC candidate registration system at www.castleworldwide.com/mrcc. Be sure to print your payment receipt at the end of the application. In addition, a receipt will be e-mailed to the e-mail address noted in the application.
 - You will be prompted to create an online profile that will serve as the basis for all interaction with MRCC and Castle. You should record your username, password, and e-mail address as used on the application for future reference and/or access to the system at a later time. You must register with the name that appears on the government-issued photo identification that you will use to enter the testing center to sit for your examination.
 - If you are unable to complete the online application, paper applications are available for download at www.castleworldwide.com/mrcc. Please reference the employer list in Appendix A when completing the employment section of your application.
4. Allow sufficient time for application review. You are encouraged to submit applications and supplemental materials as early as possible to allow for any unanticipated delays (e.g., holidays, incomplete applications, payment discrepancies).

In order to receive important electronic correspondence regarding your certification, please ensure that your e-mail program will accept e-mails from ibt@castleworldwide.com.

5. Schedule a testing session. As early as 60 days prior to the beginning of the testing window, Castle will send notification of eligibility to sit for the examination and will provide a unique username and password with directions on how to schedule a testing session. Most test sites will have morning and afternoon testing sessions available. Castle will do its best to accommodate the requested test site and date. Seats are filled on a first-come, first-served basis, based on test center availability.
6. Sit for the examination. The examination consists of 150 multiple-choice questions. You will be given three (3) hours to complete the examination.

You will be notified of the exact test location, date, and time via e-mail. Please plan to arrive at the testing center at least 15 minutes prior to the start of the testing session. Those who arrive late for testing sessions may not be permitted to test.

You must bring photo identification with signature to the test site. Acceptable forms of identification include driver's licenses, passports, and government-issued identification cards. Unacceptable forms of identification include gym memberships, warehouse memberships, school identification cards, credit cards, and identification with signature only (no photo).

7. Wait for the examination results. Examination results will be mailed within four (4) weeks after the close of the testing window. Examination results will be released only in writing by mail or through your online profile. Examination results will not be released by telephone or fax.

Eligibility Audits

A percentage of candidate applications will be audited to ensure compliance with the eligibility criteria. Applications for audit will be selected randomly. If your application is selected for audit, you will then have to supply satisfactory documentation that supports your compliance with the eligibility criteria before your certification scores are released.

National Registry

MRCC will be maintaining a national registry of certificants for public access. Within the MRCC Online System (www.castleworldwide.com/mrcc) applicants and certificants can choose to be included on this registry. Benefits of allowing your name to appear on the registry will be for verification of credentials by your customers and your employer. More details regarding the public registry are available within the MRCC Online System.

REASONABLE ACCOMMODATIONS

Reasonable accommodations provide candidates with disabilities a fair and equal opportunity to demonstrate their knowledge and skill in the essential functions being measured by the examination. Reasonable accommodations are decided upon based on the individual's specific request, disability, documentation submitted, and appropriateness of the request. Reasonable accommodations do not include steps that fundamentally alter the purpose or nature of the examination.

Reasonable accommodations generally are provided for candidates who have a physical or mental impairment that substantially limits that person in one or more major life activities (e.g., walking, talking,

hearing, performing manual tasks); have a record of such physical or mental impairment; or are regarded as having a physical or mental impairment.

To apply for reasonable accommodations, the candidate must submit a paper application along with documentation that supports reasonable accommodations provided by an appropriate licensed professional on the professional's letterhead. The documentation must include a diagnosis of the disability and specific recommendations for accommodations. It is recommended that this documentation be submitted at least 45 days prior to the preferred testing date. For more information regarding reasonable accommodations, please contact Castle.

EXAMINATION INFORMATION

Development

The development of a valid examination for the MRCC certification process began with a clear and concise definition of the knowledge, skills, and abilities needed for competent job performance. Using interviews, surveys, and group discussions, MRCC and Castle worked with experts to delineate critical job components. The questions were derived from the actual practice of medical representatives as outlined in the 2009 MRCC Role Delineation Study. All questions were written and edited by subject matter experts. All questions were referenced to published sources and validated for their importance, criticality, and relevance to the competent performance of newly certified medical representatives.

Content

The certification examination consists of 150 multiple-choice questions. Five major domains account for the examination's content. These domains and task and topic statements are noted on the following pages.

Performance Domains

- **Regulatory Compliance and Ethical Conduct**
The medical representative must protect the interests of patients and other stakeholders by complying with federal, state, and local laws, regulations, guidelines, and policies. This includes completing compliance training, conducting business activities in an ethical manner, providing appropriate product information, and documenting and managing resources.
- **Customer Interaction**
The medical representative must support informed decision making in accordance with customer and patient needs, customer and patient feedback, settings, and applicable federal, state, and local laws, regulations, guidelines, and policies. The medical representative must identify appropriate product options, address payer-access challenges, provide fair, balanced, and accurate information, and maintain the physical integrity of the product and its packaging.
- **Administration**
The medical representative must complete organizational and administrative tasks in accordance with federal, state, local, and corporate laws, regulations, guidelines, and policies. This includes implementing corporate strategies, adapting to market conditions, maintaining business relationships, recording activities, and promoting product utilization.

Content Domains

- Clinical and Therapeutic Knowledge
Medical and drug knowledge is essential to effective consultation with customers and includes broadly applicable concepts and terminology.
- Marketplace Knowledge
Knowledge of the marketplace ensures the medical representative's ability to interact effectively and appropriately in the environments in which they work.

MRCC makes the key assumption that medical representatives adhere to the policies and rules of their employer. As MRCC certification is a minimum competency program, meant to be nationally and uniformly representative of this role, company policies will not be included on the test, but participants will be expected to know the importance of company policies to their role.

MRCC uses the following language in the examination content descriptions that follow. Please review these terms and definitions.

- Medical representatives are defined as those people who, representing manufacturers, as part of their usual and customary role, call on healthcare professionals or patients for the purpose of providing educational content and/or promoting a product.
- The terms *customer* and *healthcare professional* are defined broadly, to include the person or group involved in the access, delivery, and receipt of healthcare products or services (consumable or non-consumable).
- Healthcare professionals are those people who provide healthcare products and services to patients and/or their legal representatives and families.
- Federal, state, and local laws, regulations, guidelines, and policies include but are not limited to Federal Drug Administration, anti-kickback, fraud and abuse, PDMA, HIPAA, state and local restrictions on promotions and interactions with healthcare professionals, medical testing, office visit restrictions, industry guidelines, Continuing Medical Education, grants, and sponsorships.
- *Prima facie* ethical principles: beneficence (do good), non-maleficence (do no harm), veracity (honesty), loyalty to ethical principles, justice, autonomy (individual choice of patient and prescriber/provider).
- Media refers to the approved methods of communication between medical representatives and customers such as visual aids, patient education materials, speakers programs, etc.

		Percentage of Questions
<p>Domain 1: Regulatory Compliance and Ethical Conduct: The medical representative must protect the interests of patients and other stakeholders by complying with federal, state, and local laws, regulations, guidelines, and policies. This includes completing compliance training, conducting business activities in an ethical manner, providing appropriate product information, and documenting and managing resources.</p>		25.9%
A.	Complete required compliance training and certification using approved sources to protect the interests of patients and other stakeholders.	
B.	Conduct daily business activities in an ethical manner in order to protect the interests of patients and other stakeholders.	
C.	Build trust with customers by understanding and complying with federal, state, and local laws, regulations, guidelines, and policies in order to protect the interests of patients and other stakeholders.	
D.	Ensure appropriate and timely delivery of product information by complying with federal, state, and local laws, regulations, guidelines, and policies in order to facilitate the proper use of products by customers.	
E.	Document the use of resources using established procedures in order to demonstrate compliance with federal, state, and local laws, regulations, guidelines, and policies and to manage resources effectively.	
<p>Domain 2: Customer Interaction: The medical representative must support informed decision making in accordance with customer and patient needs, customer and patient feedback, settings, and applicable federal, state, and local laws, regulations, guidelines, and policies. The medical representative must identify appropriate product options, address payer-access challenges, provide fair, balanced, and accurate information, and maintain the physical integrity of the product and its packaging.</p>		30.4%
A.	Interact with customers in compliance with federal, state, and local laws, regulations, guidelines, and policies and in accordance with the setting, applicable laws, regulations, guidelines, policies, and ethical requirements to identify customer needs.	
B.	Identify diagnostic or therapeutic options that address patient and customer needs (e.g., medical conditions, treatment needs, payer policies) through collaboration with the customer in order to support informed decision making.	
C.	Address payer-access challenges for customers in compliance with federal, state, and local laws, regulations, guidelines, and policies in order to support appropriate diagnostic and therapeutic options.	
D.	Provide customers with approved fair, balanced, and accurate information consistent with applicable federal, state, and local laws, regulations, guidelines, and policies to validate appropriate diagnostic or therapeutic options and support informed decision making by the customer and the patient.	
E.	Use product resources (e.g., educational materials and programs, samples) in accordance with their intended purposes to support appropriate product use and indication.	
F.	Maintain the physical integrity of the product and packaging by adhering to all federal, state, and local laws and regulations in order to protect the interests of customers, their patients, and other stakeholders.	
G.	Gather feedback from the customer through regular interaction to understand the diagnostic or therapeutic experience, identify additional needs, and comply with reporting obligations.	

		Percentage of Questions
Domain 3: Administration: The medical representative must complete organizational and administrative tasks in accordance with federal, state, local, and corporate laws, regulations, guidelines, and policies. This includes implementing corporate strategies, adapting to market conditions, maintaining business relationships, recording activities, and promoting product utilization.		7.9%
A.	Implement business plans in accordance with corporate strategy in order to promote appropriate product utilization and adapt to market conditions.	
B.	Communicate effectively and responsibly with all internal stakeholders using appropriate media in order to maintain business relationships and achieve business plans.	
C.	Record activities (e.g., distribution of samples, leave behinds) using established procedures in order to demonstrate compliance with federal, state, and local laws and regulations	
Domain 4: Clinical and Therapeutic Knowledge: Clinical and therapeutic knowledge is essential to effective consultation with customers and includes broadly applicable concepts and terminology.		24.8%
A.	Prescribing Information and Safety	8
B.	Anatomy and Physiology (Drug Interaction with the Body)	5
C.	Medical Ethics (Within Practice of Medicine)	5
D.	Pharmacology	4
E.	Diagnostic Tests and Evaluation Procedures	3
F.	Clinical Trials and Research	4
G.	Product Lifecycle	2
Domain 5: Marketplace Knowledge: Knowledge of the marketplace ensures the medical representative's ability to interact effectively and appropriately in the environments in which they work.		11.1%
A.	Concepts in Managed Care	3
B.	Formulary Status	5
C.	Healthcare Settings	2
D.	Medical Training and Scope of Practice for Various Healthcare Providers	2
E.	Role of Standard Setting Organizations and Their Impact on Customers	2

SAMPLE EXAMINATION QUESTIONS

The following questions were taken from the examination question repository and serve as samples of the question type and question content found on the certification examination. Please see the answer key on page 12 of this handbook.

1. According to HIPAA, which patient rights are preserved?
 - A. Access to physician credentials
 - B. Healthcare provider preference
 - C. Possession of a patient's own medical record
 - D. Privacy of health information

2. A medical representative schedules an appointment with an important customer to share information on a clinical trial. When she arrives at the appointment, she is informed that the customer is unavailable due to a hospital emergency. What action should the medical representative take?
- A. Go to the hospital to try to catch the customer in the parking lot or lounge to review the important information.
 - B. Leave a copy of the study for the customer with a note that it has important information to read and you will call again soon.
 - C. Reschedule the appointment for a convenient time for the customer in order to get the customer's full attention regarding the study.
 - D. Press the receptionist for just a couple of minutes because of the important study that the customer needs to see.
3. A medical representative is responsible for managing an inventory of pharmaceutical or medical products. The following cases are available. Which case noted by lot number should be distributed **FIRST**?

PRODUCT	LOT NUMBER	EXPIRATION DATE
X	A9 100	19Aug2010
X	B4 200	03Jan2011
X	L4 106	12Mar2010
X	L4 107	15Apr2011

- A. Lot number A9 100
 - B. Lot number B4 200
 - C. Lot number L4 106
 - D. Lot number L4 107
4. A medical representative has an important customer who has clinic hours until 7 pm on Thursday evenings. The medical representative has been informed that he can usually get 15 to 20 minutes of undivided time with the customer if he brings dinner to the office at the close of business on Thursday. The medical representative has a promotional budget for meals. As a medical representative, which of the following actions is **MOST** appropriate under the PhRMA code?
- A. Ask if he can come on Thursday evening without providing the meal and have a product discussion with the customer.
 - B. Decline the Thursday dinner invitation and call on the customer as he has in the past to have the product discussions.
 - C. Explain that it is inappropriate to provide dinners and ask if there is another time when he can schedule a discussion with the customer.
 - D. Schedule a Thursday evening dinner appointment with the customer and make sure to provide a product presentation to everyone participating in the dinner.

5. Which of the following terms refers to the body's ability to resist non-specific organisms or toxins that can damage the tissues and organs?

- A. Acquired immunity
- B. Adaptive immunity
- C. Antigen immunity
- D. Innate immunity

6. The majority of a physician's patients are covered under formularies noted in the chart. During the medical representative's latest discussion with the physician, the physician asks which patients are at an out-of-pocket cost advantage when the physician prescribes drugs X, Y, and Z. What is the **CORRECT** response?

DRUG	PLATINUMMED FORMULARY TIER STATUS/ CO-PAY	GOLDMED FORMULARY TIER STATUS/ CO-PAY	SILVERMED FORMULARY TIER STATUS/ CO-PAY
Drug X	2 nd tier \$ 30.00	2 nd tier \$ 25.00	2 nd tier \$ 20.00
Drug Y	2 nd tier \$ 35.00	2 nd tier \$ 30.00	3 rd tier \$ 25.00
Drug Z	2 nd tier \$ 47.30	2 nd tier \$ 45.00	3 rd tier \$ 42.30

- A. Patients with Platinumbed formulary
- B. Patients with Goldmed formulary
- C. Patients covered under Silvermed Formulary
- D. Not enough information provided

7. A medical representative learns from a physician that the use of the medical representative's product is very effective for a non-labeled use. What action should the medical representative take?

- A. Consult with other physicians on their best practices.
- B. Avoid discussing the information.
- C. Share the information with other physicians.
- D. Submit the details of the discovery to local pharmacists.

8. A physician outlines his treatment algorithm for new patients within a specific disease state. Based on new research, a medical representative believes that the physician's current process is outdated and patient care could be compromised. The medical representative mentions a new research study to the physician; however, the physician is resistant to change his treatment algorithm. What is the medical representative's **BEST** course of action?
- A. Identify the weaknesses of the physician's treatment algorithm and leave a copy of the new research study for the physician's review.
 - B. Leave a highlighted copy of the new research study for the physician's review and follow up later.
 - C. Review media coverage of the new study with the physician and discuss editorial comments regarding the study.
 - D. Review the study with the physician and discuss the key patient benefits, cost outcomes, and results of the study.

9. Based on prescription data for four physicians in quarter 1, which of the following statements is **TRUE**?

INDIVIDUAL	JAN RX VOLUME	FEB RX VOLUME	MARCH RX VOLUME	QUARTER 1 VOLUME
Dr. Smith	25	20	22	67
Dr. Williams	30	35	35	100
Dr. Galina	27	25	38	97
Dr. Lopez	10	15	15	40

- A. Dr. Galina prescribed the highest volume of the product in the first quarter.
 - B. Dr. Galina's prescription volume increased the most from the beginning to the end of the quarter.
 - C. Dr. Smith has the most growth potential for the product.
 - D. Dr. Lopez should not be called on due to his lack of support for the product.
10. Which department of the FDA is responsible for protecting public health by assuring that prescription drug information is truthful, balanced, and accurately communicated?
- A. DDMAC
 - B. DHHS
 - C. OIG
 - D. PhRMA

11. Drug metabolism and excretion are key factors that determine which characteristic of a drug?
- A. Bioavailability
 - B. Distribution
 - C. FDA pregnancy category
 - D. Half-life
12. Which of the following health insurance programs helps to cover inpatient hospital care, skilled nursing facilities, home health services, and hospice care for American citizens 65 years and above?
- A. Consumer Driven Health Plan (CDHP)
 - B. Health Reimbursement Account
 - C. Medicare Part A
 - D. Medicare Part D

SAMPLE QUESTION ANSWER KEY

QUESTION NUMBER	CORRECT ANSWER	DOMAIN
1	D	Domain 1
2	C	Domain 2
3	C	Domain 3
4	D	Domain 4
5	D	Domain 5
6	C	Domain 6
7	B	Domain 1
8	D	Domain 2
9	B	Domain 3
10	A	Domain 4
11	D	Domain 5
12	C	Domain 6

FOR MORE PREPARATION

Demo Test

Castle offers a free online tutorial and demo test to familiarize candidates with the computer-based testing environment. The online demonstration and tutorial are accessible at any time, anywhere, through any computer with Internet access. Candidates may access the tutorial and demo on Castle's Web site www.castleworldwide.com/tds_v5/asp/home.asp. The demo is not intended to be a review of MRCC examination content.

EXAMINATION PREPARATION

How to Study

MRCC encourages candidates to prepare for the examination by using resources such as those listed in this handbook. (*A list of recommended references can be found in Appendix B.*)

Plan your review methods well in advance of the examination. Think about the study method that is best for you (e.g., individual review, study group, class) and the types of materials that are most helpful (e.g., textbooks, audio or video programs, outlines, memory aids). It may also be helpful to use materials given to you during training activities related to your work as a medical representative.

Managing Test Anxiety

A little anxiety regarding test taking can be helpful because it stimulates and motivates you to perform at your best; however, severe anxiety can hinder test performance. If you know that you frequently experience severe test anxiety, consider preparing yourself for the examination by developing coping mechanisms to make your tension work for you. In addition, an online demonstration and tutorial are available at www.castleworldwide.com/tds_v5/asp/home.asp. The demonstration and tutorial will familiarize you with the testing environment. They are not intended to be a review of MRCC examination content.

Before the day of the examination, visualize and rehearse the testing situation. Imagine yourself taking the examination with a positive attitude and focused, but calm, behavior.

Take measures to reduce your stress during the examination. Use deep-breathing techniques, and be sure to stretch your muscles periodically. Such exercises can reduce both physical and mental stress. If necessary, take a few minutes to imagine a calm, pleasant scene, and repeat positive phrases.

Do not let the comments or behavior of testing personnel or other examinees make you anxious. As examinees are taking different versions of the examination, examinees will finish at different times – some finishing very early, others taking the full three (3) hours. Examinees that finish more quickly than you may not perform any better than you. Everyone works at his or her own speed. Some of the best test performers routinely use the total allocated time. Remember that (a) there is no limit to the number of examinees who can receive passing scores, (b) there is no bonus for completing the examination early, and (c) you are not competing with anyone else.

Eating well, avoiding too much alcohol, and maintaining a regular sleep pattern for several days before the examination will help you to be physically prepared. Also, on the day before you take the test, collect all the supplies you will need and choose comfortable clothing. Knowing that you are prepared for the test will help to reduce your anxiety.

Finally, your best method for controlling your anxiety is to feel prepared for the test. Designing a study plan well in advance will help you get ready.

Tips for Taking the Examination

- Budget your time well. Because you will have three (3) hours to complete 150 questions, you will want to complete more than half (75) in less than half the time. This is because you will want extra time after completing the full examination to review questions you either skipped or questions you may have marked for review. Also, allow time so that every hour you can take a minute or so to relax your eyes and stretch your neck and hand muscles.
- Read each question carefully, focusing on what is being asked. If you are uncertain about the answer but nevertheless want to give a tentative response at the time, mark the test question to indicate that you want to review the test question and your answer if time allows. Go back to questions marked in this manner after completing the entire test.
- Read all options before selecting your answer. Always select the best choice.
- Do not overanalyze or try to “read into” a question. Questions are not written to be tricky. Do not assume additional information beyond what is given in the test question. All information necessary to answer the question will be given in the text of the question or scenario.
- Remember that this is a national test. Questions will focus on practice across the United States. The questions will be based upon an accepted knowledge base. Choose options that you know to be correct in any setting.
- If there are questions including the words “not,” “except,” or “least” answer these with particular care because you will be looking for the exception. These questions involve a reversal of your usual thought patterns.
- Pay close attention to key words such as “best,” “most,” “primary,” or “usually.” These words indicate that other options may at times be correct, but given the wording or situation in the test question, you must judge which option is the best.
- Skip difficult questions and come back to them later. Questions on the test are not ordered by difficulty (i.e., they do not go from easiest to hardest). Also, content areas (the domains) and topics are addressed randomly in questions throughout the test.
- When guessing, do so by the process of elimination. Treat each option as a true or false statement, and eliminate those that you would not select. Narrow your choices and then make an educated guess.
- Answer every question, because there is no penalty for guessing. Go through the entire test, answering the questions you believe you know and skipping the difficult questions. Leave time at the end of the testing period to go back to the questions you skipped or want to review. If you are running out of time, leave a minute or so at the end to complete all of the blank questions randomly. Remember, you have a 25% probability of answering a question correctly by chance alone, so don't miss any!

- If reading English is difficult for you because English is not your primary language, maximize your time by reading and answering all the shorter questions first. After completing all of the short questions, go back and attempt to answer the longer questions.
- Review the suggested resources listed in this handbook.

OTHER EXAMINATION INFORMATION

Rescheduling an Examination

You may reschedule a testing session up to five (5) business days before your testing appointment through the online scheduling system. You may reschedule your testing appointment for either later in the testing window (time/availability permitting) or the next available testing window, if you are still eligible (i.e., within the 366-day window of application eligibility). A \$50 nonrefundable fee will apply.

Not appearing for your testing appointment or rescheduling your exam less than five (5) business days before your testing appointment will count as your testing appointment. You will be marked as a no-show candidate and your testing fees will be forfeited.

Canceling a Testing Appointment

Testing appointments can be cancelled; however, candidates will not receive a refund for the canceled testing appointment. Candidates who are unable to test during their scheduled testing appointment should follow the rescheduling rules.

If the candidate does not take the examination within a 366-day period from the submission of the application, then the application is closed and the candidate must reapply and pay the application fee again.

Examination Rules

MRCC and Castle follow industry standard testing rules as outlined below.

Prohibited Items

Candidates are expressly prohibited from bringing the following items to the test site:

- cameras, cell phones, optical readers, or other electronic devices that include the ability to photograph, photocopy, or otherwise copy test materials
- notes, books, dictionaries, or language dictionaries
- book bags or luggage
- iPods, mp3 players, headphones, or pagers
- calculators, computers, PDAs, or other electronic devices with one or more memories
- personal writing utensils (*i.e.*, pencils, pens, and highlighters)
- watches
- food and beverage
- hats, hoods, or other headgear

If Castle testing personnel determine that you have brought any such items to the test site, they may be demanded and held for an indefinite period of time by Castle testing personnel. We reserve the right to review the memory of any electronic device that may be in your possession at the testing center to determine whether any test materials have been photographed or otherwise copied.

If our review determines that any test materials are in the memory of any such device, we reserve the right to delete such materials and/or retain them for subsequent disciplinary action. Upon completion of our review and any applicable deletions, we will return your device to you, but will not be responsible for the deletion of any materials that may result from our review, whether or not such materials are test materials.

By bringing any such device into the test site in contravention of our policies, you expressly waive any confidentiality or other similar rights with respect to your device, our review of the memory of your device and/or the deletion of any materials. Castle, the examination site, and the test administration staff are not liable for lost or damaged items brought to the examination site.

Examination Scoring

Examination results will be mailed within four (4) weeks after the close of the testing window. Examination results will be released only in writing by mail, not by telephone or fax. Examination scores will also be available through the online candidate system. In the case of an eligibility audit, examination scores will be held until the audit is complete.

Certificates

After passing the examination, candidates will receive a personalized certificate, which is suitable for framing, and a wallet card.

Examination Retakes

If you fail the examination, you will receive information on scheduling a second testing appointment. The examination retake fee is \$200 and must be paid before scheduling a new testing appointment.

PROFESSIONAL STANDARDS/CODE OF CONDUCT

Adopted December 2009

Medical Representatives Certification Commission (MRCC) expects that participants certified by their programs shall conduct themselves in the utmost professional manner in all interactions with healthcare professionals. MRCC requires the ethical and responsible practice of business of all certificants as well as their pledge to abide by the following code. Healthcare professionals are defined as licensed healthcare professionals as well as any persons engaged in the access, delivery and receipt of healthcare products or services. The spirit of this Code is to include all interactions between medical representatives and those who provide input of any kind into the education, care and safety of patients.

Certificants must strive for the highest possible standards of personal integrity, professional competence, sound judgment, and discretion when carrying out their professional responsibilities.

As a condition of their certification, all participants must adhere to the following code and its intent. Failure to do so will result in disciplinary action up to and including revocation of Certification.

Participants must accept this code upon initial application, upon each examination and upon each re-certification application:

- I will promote the health and well-being of patients as my first priority; I will in no way jeopardize the physician-patient relationship.
- I will uphold and protect the patients' rights to privacy at all times.
- I will comply with all procedures and regulations made known to me by the healthcare professionals, their practices and/or their healthcare systems with whom I interact to share information and education.
- I will not employ any inducement or misleading statements to gain access to a healthcare professional.
- I will conduct all interactions with healthcare professionals in a highly professional and ethical manner.
- I will provide product information to healthcare professionals that is accurate, fairly balanced, and consistent with FDA approved labeling; I will uphold all patient and product safety guidelines.
- I will comply with all laws and regulations relating to my professional and business activities.
- I will conduct my professional activities with honesty, integrity, respect, fairness and good faith in a manner that reflects well upon my profession.
- I will avoid any activity that demeans the credibility and dignity of my profession.
- I will maintain competence and proficiency in my profession by implementing a personal program of continuing professional education and assessment.

RECERTIFICATION

Certification Renewal Requirements

Certification renewal is required every 2 years. Certification may be renewed through either Option 1 or Option 2 below; however, ***all certification renewal candidates must renew certification by examination at least once during every 6-year period.***

Option 1: Renew certification by completing 32 contact hours of approved continuing education during the 2-year period. Approved continuing education providers will be designated by MRCC.

Option 2: Successfully complete the certification examination prior to expiration of the current 2-year certification period.

Continuing Education Requirements

MRCC is in the process of approving Continuing Education (CE) providers and/or courses. Information will be posted here as it becomes available. Information related to CE requirements for recertification will also be e-mailed to applicants and certificants as it becomes available.

POLICIES AND PROCEDURES

MRCC maintains a policy and procedure manual related to the certification program. Key policies and procedures related to the examination are noted below.

Eligibility Appeal Policy

Adverse decisions by MRCC may include, but are not limited to:

1. Denial of certification for an individual.
2. Denial of adequacy of credentials related to education and experience.

In the event of an adverse decision by MRCC, MRCC shall advise the individuals involved of the decision and of the procedure for appealing the adverse decision. The individual desiring to appeal the adverse decision must adhere to the procedures outlined.

The appeal must be received within 60 days of the date that notice of the adverse decision was issued by MRCC. The candidate is responsible for demonstrating that the appeal should be granted. MRCC will refer the request to the Appeals, Ethics, and Disciplinary Committee which will review the request through its Appeals Panel and, at its discretion, the Appeals, Ethics, and Disciplinary Committee will notify the applicant of its determination.

Professional Practice and Disciplinary Policies and Procedures

The Professional Practice and Disciplinary Policy and Procedures of the MRCC are intended to assist and inform certificants and candidates for certification as to professional conduct and disciplinary procedures. The MRCC conducts a certification program for medical representatives and has established recertification requirements. The MRCC affirms that, after a candidate has successfully passed the certification examination, the standards for entry into certification have been satisfied. The MRCC does not express an opinion on the competence or warrant the job performance of certificants. However, it is expected that a certificant or candidate for certification agree to comply at all times with the *MRCC Code of Conduct*. All matters pertaining to professional practice and discipline are governed by the Appeals, Ethics, and Discipline Committee.

Persons concerned about possible violations of MRCC standards shall identify in a written statement to the Commission the persons alleged to be involved and the facts concerning the alleged conduct in as much detail and specificity as possible, with available documentation. The statement must include the name, address, and telephone number of the person making the statement and others who may have knowledge or facts concerning the alleged violation.

Disciplinary Standards

MRCC may revoke or otherwise take action with regard to the application or certification of an individual in the case of:

1. Ineligibility for certification;
2. Irregularity in connection with any certification examination;
3. Unauthorized possession, use, access, or distribution of certification examinations, score reports, answer sheets, certificates, certificant or applicant files, documents, or other materials;
4. Material misrepresentation or fraud in any statement to the MRCC or to the public including, but not limited to, statements made to assist the applicant, certificant, or another apply for, obtain, or retain certification;
5. The conviction of, plea of guilty, or plea of *nolo contendere* to a felony or misdemeanor that is directly related to an applicant or certificant's education, training, or employment; or
6. Failure to adhere to the *MRCC Code of Conduct* or other relevant professional standards of practice.

Appendix A: Companies

Abbott Laboratories
Abraxis BioScience Inc.
Acorda Therapeutics Inc.
Actelion Ltd.
Adolor Corp.
AEterna Zentaris Inc.
Alcon Inc.
Alexion Pharmaceuticals Inc.
Alkermes Inc.
Allergan Inc.
Alnylam Pharmaceuticals Inc.
Amgen Inc.
Amylin Pharmaceuticals Inc.
Anika Therapeutics Inc.
Antisoma Plc.
Arana Therapeutics Ltd.
ArQule Inc.
Array BioPharma Inc.
Astellas Pharma Inc.
AstraZeneca Plc.
AVI BioPharma Inc.
Bavarian Nordic AS
Baxter International Inc.
Bayer AG
Biocon Ltd.
BioCryst Pharmaceuticals Inc.
Biogen Idec Inc.
BioMarin Pharmaceutical Inc.
BioMS Medical Corp.
Bioniche Life Sciences Inc.
Biota Holdings Ltd.
Boehringer Ingelheim GmbH
Bristol-Myers Squibb Co.
Cangene Corp.
Celgene Corp.
Cell Genesys Inc.
Cephalon Inc.
Cerus Corp.
Chugai Pharmaceutical Co.
CombinatoRx Inc.
Crucell NV
CSL Ltd.
Cubist Pharmaceuticals Inc.
CV Therapeutics Inc.
Cypress Bioscience Inc.
Cytokinetics Inc.
Cytos Biotechnology Ltd.
Daiichi Sankyo Co.
Dainippon Sumitomo Pharma Co.
Dyax Corp.
Dynavax Technologies Corp.
Eisai Co.
Elan Corp.
Eli Lilly and Co.
Enzo Biochem Inc.
Enzon Pharmaceuticals Inc.
Exelixis Inc.
Forest Laboratories Inc.
Genentech Inc.
Genmab AS
GenVec Inc.
Genzyme Corp.
Gilead Sciences Inc.
GlaxoSmithKline Plc.
GPC Biotech AG
GTC Biotherapeutics Inc.
H. Lundbeck AS
Hospira Inc.
Human Genome Sciences Inc.
ImmunoGen Inc.
Innovex
Inspire Pharmaceuticals Inc.
Intercell AG
InterMune Inc.
inVentiv Resource Solutions, Inc.
Isis Pharmaceuticals Inc.
Johnson & Johnson
Kyowa Hakko Kirin Co.
Lexicon Pharmaceuticals Inc.
Ligand Pharmaceuticals Inc.
Maxygen Inc.
Medarex Inc.
MediGene AG
Medivir AB
Merck & Co.
Merck KGaA
Micromet Inc.
Mitsubishi Tanabe Pharma Corp.
Monogram Biosciences Inc.
MorphoSys AG
Mylan Inc.
Myriad Genetics Inc.
Nektar Therapeutics
Neurobiological Technologies Inc.
NeuroSearch AS
NovaQuest
Novartis
Novo Nordisk AS
Novogen Ltd.
NPS Pharmaceuticals Inc.
Nycomed Group
Oncothyreon Inc.
Onyx Pharmaceuticals Inc.
Oscient Pharmaceuticals Corp.
OSI Pharmaceuticals Inc.
Otsuka Pharmaceutical Co.
Oxford Biomedica Plc.
Pain Therapeutics Inc.
Palatin Technologies Inc.
PDI
PDL BioPharma Inc.
Pfizer Inc.
PharmAthene Inc.
Procter & Gamble Co.
Progenics Pharmaceuticals Inc.
Publicis Selling Solutions
QLT Inc.
Regeneron Pharmaceuticals Inc.
Roche
Sanofi-Aventis Group
Schering-Plough Corp.
SciClone Pharmaceuticals Inc.
SciGen Ltd.
Seattle Genetics Inc.
Shionogi & Co.
Shire Plc.
Sinovac Biotech Ltd.

Solvay SA
Stada Arzneimittel AG
Taisho Pharmaceutical Co.
Takeda Pharmaceutical Co.
Targacept Inc.
Teva Pharmaceutical
Industries Ltd.

ThromboGenics NV
Transgene SA
Trimeris Inc.
UCB SA
Unigene Laboratories Inc.
United Therapeutics Corp.
Vernalis Plc.

Vertex Pharmaceuticals Inc.
ViroPharma Inc.
Vitrolife AB
Watson Pharmaceuticals Inc.
Wyeth
Xoma Ltd.
ZymoGenetics Inc.

Appendix B: Recommended References

Author	Title	Edition	Location	Publisher	Date
Booth, K.A. and T.D. Wyman	Anatomy, Physiology, and Pathophysiology for Allied Health	2nd edition	Boston, MA	McGraw Hill Higher Education	2009
Ehrlich, A. and C.L. Schroeder	Medical Terminology for Health Professionals	6th edition	Clifton Park, NY	Delmar, Cengage Learning	2009
Ellis, H.	Clinical Anatomy: Applied Anatomy for Students and Junior Doctors	11th edition	Malden, MA	Blackwell Publishing Ltd.	2006
Faiz, O. and D. Moffat	Anatomy at a Glance	2nd edition	Malden, MA	Blackwell Publishing Ltd.	2006
Grice, J.	Global Pharmaceutical Marketing: A Practical Guide to Codes and Compliance	1st edition	Chicago	Pharmaceutical Marketing	2008
Guyton, A.C. and J.E. Hall	Textbook of Medical Physiology	11th edition	Philadelphia, PA	Elsevier/Mosby, Inc.	2006
Hackshaw, A.	A Concise Guide to Clinical Trials	1st edition	Hoboken, NJ	John Wiley & Sons	2009
Heymsfield, S.B. et al, Eds.	Human Body Composition	2nd edition	Champaign, IL	Human Kinetics	2005
Hitner, H. and B. Nagle	Pharmacology: An Introduction	5th edition	Boston, MA	McGraw Hill Higher Education	2005
Kongstvedt, P.R.	The Managed Health Care Handbook	4th edition	Gaithersburg, MD	Aspen Publishers	2001
Krager, D. and C.H. Krager	HIPPA for Health Care Professionals	1st edition	Clifton Park, NY	Delmar, Cengage Learning	2008
Krieger, P.A.	A Visual Analogy Guide to Human Anatomy	1st edition	Englewood, CO	Morton Publishing Company	2005
Krieger, P.A.	A Visual Analogy Guide to Human Physiology	1st edition	Englewood, CO	Morton Publishing Company	2008
Moore, K.L. and A.F. Dalley	Clinically Oriented Anatomy	5th edition	Philadelphia, PA	Lippincott, Williams & Wilkins	2006
Moore, K.L. and A.M.R. Agur	Essential Clinical Anatomy	3rd edition	Philadelphia, PA	Lippincott, Williams & Wilkins	2007
Neighbors, M. and R.Tannehill-Jones	Human Diseases	1st edition	Albany, NY	Delmar-Thomson Learning	2000
Pisano, D.J. and D.S. Mantus	FDA Regulatory Affairs: A Guide for Prescription Drugs, Medical Devices, and Biologics	2nd edition	New York	Informa Healthcare	2008

Author	Title	Edition	Location	Publisher	Date
Pozgar, G.D.	Legal and Ethical Issues for Health Professionals	1st edition	Sudbury, MA	Jones and Bartlett	2007
Rascati, K.L.	Essentials of Pharmacoeconomics	1st edition	Philadelphia	Wolters Kluwer	2009
Scott, A.S. and E. Fong	Body Structures & Functions	11th edition	Clifton Park, NY	Delmar, Cengage Learning	2009
Stanfield, P. et al	Essential Medical Terminology	3rd edition	Sudbury, MA	Jones and Bartlett	2008
Straus, S.E. et al	Evidenced-based Medicine: How to Practice and Teach EBM	3rd edition	Philadelphia	Elsevier Churchill Livingstone	2005
Tortora, G.J.	Principles of Human Anatomy	9th edition	Hoboken, NJ	John Wiley & Sons	2002
Tozer, T.N. and M. Rowland	Introduction to Pharmacokinetics and Pharmacodynamics: The Quantitative Basis of Drug Therapy	1st edition	Philadelphia	Lippincott Williams & Wilkins	2006
Van De Graaff, K.M. et al	A Photographic Atlas for the Anatomy and Physiology Laboratory	6th edition	Englewood, CO	Morton Publishing Company	2007
Wang, D. and A. Bakhai	Clinical Trials: A Practical Guide to Design, Analysis, and Reporting	1st edition	Chicago	Remedica	2006
Willis, M.C.	Medical Terminology: A Programmed Learning Approach to the Language of Health Care	1st edition	Philadelphia, PA	Lippincott, Williams & Wilkins	2003
	Merriam-Webster's Medical Desk Dictionary	Revised edition	Clifton Park, NY	Delmar, Cengage Learning	2005
	Stedman's Concise Medical Dictionary for Health Professions	4th edition	Philadelphia, PA	Lippincott, Williams & Wilkins	2001
	Stedman's Medical Dictionary for Health Professionals and Nursing	6th edition	Philadelphia, PA	Lippincott, Williams & Wilkins	2008
	Taber's Cyclopedic Medical Dictionary	19th edition	Philadelphia, PA	F.A. Davis Company	2001