

YEAR 2026

NCRP

CLINICAL COMPETENCY  
CERTIFICATION IN  
REPRODUCTIVE PSYCHIATRY

CLINICAL SKILLS EXAM

Information for  
Prospective Examinees



NATIONAL CURRICULUM IN  
REPRODUCTIVE  
– PSYCHIATRY –

## OVERVIEW

The NCRP Clinical Skills Examination (CSE) is a rigorous assessment of advanced clinical competence in reproductive psychiatry. It is designed for clinicians who have completed substantial training and have meaningful clinical experience across the reproductive lifespan.

The exam evaluates both clinical reasoning and clinical skills, including diagnostic assessment, risk assessment, and collaborative, evidence-based treatment planning. It is intended to reflect real-world subspecialty practice rather than rote knowledge or perfection.

## EXAM DATES, REGISTRATION AND COST

### Exam Dates (Eastern Time)

Monday, May 11, 2026

8:00 AM – 12:00 PM

4:00 PM – 8:00 PM

Saturday, August 29, 2026

9:00 AM – 1:00 PM (limited availability)

Monday, September 14, 2026

8:00 AM – 12:00 PM

1:00 PM – 5:00 PM

### Registration Timeline (anticipated)

Registration opens: February 9, 2026

Registration closes:

- March 31, 2026 (for May exams)
- July 31, 2026 (for August and September exams)

**Cost:** \$800

### Platform

The exam is conducted via Zoom, using one main meeting room and multiple breakout rooms.



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# ELIGIBILITY FOR EXAM

Examinees must meet eligibility requirements through one of the following preparation pathways.

## Pathway 1: NCRP Intensive Pathway

All of the following are required:

- Completion of NCRP Intensive (or NCRP Advanced prior to 2025)
- At least 80% attendance in NCRP Long-Term Supervision
- Significant clinical experience in reproductive psychiatry across the reproductive lifespan.\*

## Pathway 2: Psychiatry Fellowship Pathway

- At least 75% attendance in the NCRP Fellows Course and
- Good standing in, or completion of, a formal reproductive psychiatry or consult-liaison psychiatry fellowship.\*\*

*\*We recommend the equivalent of one year of full-time supervised clinical practice in reproductive psychiatry (e.g., two years at half-time), similar in scope to a clinical fellowship.*

*\*\*Other fellowship training pathways may be considered on a case-by-case basis.*

# BENEFIT TO PARTICIPANTS

Successful completion of this examination results in attainment of an NCRP Clinical Competency Certification in Reproductive Psychiatry. This certification indicates completion of advanced training through an approved NCRP preparation pathway and successful passage of both subspecialty medical knowledge and clinical skills examinations.

# EXAM CONTENT



The exam consists of a series of simulated clinical encounters. Some cases will involve standardized patients; others will simulate answering questions for patients or colleagues. Each case will include information regarding the clinical context, any necessary background information, specific instructions for focusing the conversation, and guidelines for timing. Topics covered in the cases include:

- Premenstrual disorders
- Perimenopause
- Management of psychiatric symptoms or disorders during the perinatal period

The exam requires substantial clinical preparation. You should register only if you have had meaningful exposure to a diverse reproductive psychiatry patient population across the lifespan.

## Preparation

No specific study materials are required. However, successful performance depends on rigorous training and substantial hands-on clinical experience in reproductive psychiatry. For examinees using the NCRP Intensive pathway, longitudinal supervision is required for eligibility, but is not sufficient to replace real-world clinical experience.

## What Successful Examinees Demonstrate

Successful examinees consistently demonstrate:

- Proficiency in focused psychiatric diagnostic interviewing
- Ability to recognize medical conditions that may mimic psychiatric illness
- Respectful, empathetic, and collaborative communication
- Strong clinical decision-making grounded in evidence
- Clear explanation of complex risk-risk comparisons in accessible language
- Safe, evidence-based treatment planning across reproductive transitions
- Sensitivity to relational, functional, and psychosocial context
- Patient-centered care that incorporates preferences, values, and circumstances

# LOGISTICS AND TECHNOLOGY

The exam takes place on Zoom. Examinees must ensure a stable internet connection, a private, quiet, distraction-free environment, and fully functional audio and video equipment.

Joining from a computer or laptop is strongly recommended. Participation from a mobile phone may limit functionality and is not advised.

You will receive the Zoom link one week before the exam.

# EXAM STRUCTURE



The exam consists of two simulated patient scenarios and three clinical questions.

## Patient scenarios:

- Each scenario is 45 minutes long and will be strictly timed.
- Exam sessions will take place in a Zoom breakout room with one examinee, one or two examiners and a standardized patient.
- Examinees will receive the patient cases the day of the exam and will be able to review the brief background provided. They will then interview the standardized patient and be asked to share diagnostic impressions and engage in treatment planning in collaboration with the patient. The final 10 minutes of the session will be devoted to question and answer with examiners.

## Clinical questions:

- Sessions will be 30 minutes long and strictly timed.
- Sessions will take place in a Zoom breakout room and include one examinee and one or two examiners.
- Sessions will be based on clinical questions that may arise from patients or colleagues.
- Examinees will be provided with a brief question at the time of the exam, and will discuss it with the examiner.

# CASE MATERIALS

Each case includes background clinical information. The amount of information provided varies by case.

- Examinees are not responsible for verifying or re-eliciting information already provided in the background document.
- All available laboratory and imaging data are included in the background materials.
- You may recommend additional studies, but results will not be provided during the exam.
- You may request collateral information verbally during the encounter.
  - When applicable, collateral is provided in a standardized written format.

## Time Management Within Each Case

Each case includes a recommended time-management plan, typically including:

- Introductions and review of the background clinical document
- Focused clinical interview (or discussion of the vignette)
- Discussion of assessment and treatment planning
- Additional examiner questions

### What to Expect

At the start of each session, examiners briefly introduce themselves.

During standardized patient encounters, examiners then turn off their cameras and do not provide feedback or prompts.

At the end of the session, examiners turn their cameras back on and may ask additional questions as needed.

A lack of examiner response during the encounter is intentional and should not be interpreted as evaluative.

### Case Focus

Case instructions may include language such as:

- Use the information provided, along with data gathered during the interview, to determine the most likely diagnosis and recommend immediate next steps.
- Determine the most likely diagnosis and formulate a comprehensive treatment plan.

Not all content areas apply to every case. Examiners score performance based on the specific case focus and instructions provided.

### Day-of Instructions

- Log in 15 minutes early to test audio and video
- Moderators will assign breakout rooms
- Examinees return to the main room between cases
- Adherence to the schedule is essential to avoid delays

### Expectations

Treat this exam as you would an in-person clinical encounter:

- Maintain a respectful tone
- Dress professionally
- Ensure privacy and confidentiality

### Failure & Retakes

If a participant does not pass the exam, they will receive feedback indicating which cases were not passed and will remain eligible to sit for future exams.