



IBLCE[®]

*International Board of
Lactation Consultant Examiners*

CANDIDATE INFORMATION GUIDE

For initial, repeat, and lapsed candidates who plan to apply for the IBCLC[®] examination

As an International Organisation, IBLCE[®] uses British English in its publications.

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I. What is IBLCE?

IBLCE[®], or the International Board of Lactation Consultant Examiners[®], is the independent international certification body conferring the International Board Certified Lactation Consultant[®] (IBCLC[®]) credential.

A. Contact Information

International Board of Lactation Consultant Examiners (IBLCE)

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Fairfax, VA 22030-2545

USA

Phone: +1 703-560-7330

www.iblce.org

IBLCE has locations in Austria, Australia, and the United States. Candidates may reach the location that serves their country of residence by using the contact information found on the IBLCE website.

NOTE: Due to COVID-19, IBLCE provides additional resources regarding applying for the IBCLC certification and the examination administration on its website on the [COVID-19 Resource Centre](#). Please check this website regularly as you prepare to either apply for eligibility or sit the IBCLC examination in 2021.

B. Key Dates

Please visit the IBLCE website for application deadlines and other important key dates.

II. Purpose of Certification

Purpose: The purpose of the IBCLC certification is to recognise each individual who meets established criteria which uphold standards of practise and thereby promote public protection.

Population Being Certified: An IBCLC is a professional member of the healthcare team who has earned and maintains the credential which identifies knowledge and expertise in breastfeeding management and care. An individual who holds the credential has met defined eligibility requirements and passed a rigorous, psychometrically sound examination. Since 1985, the IBCLC credential has provided evidence that, as a practitioner, the IBCLC has the required knowledge to:

- Advocate and educate about breastfeeding as a global public health imperative
- Provide leadership for society, from communities to policymakers
- Promote environments that support breastfeeding
- Facilitate an optimal breastfeeding experience for families
- Identify and manage high-acuity lactation challenges

An IBCLC works independently and in collaboration to empower mothers, children, and families to meet their breastfeeding goals.

Mark Issued: The designation issued to an International Board Certified Lactation Consultant is both International Board Certified Lactation Consultant and in abbreviated form IBCLC.

The IBCLC certification programme offers a voluntary credential, and certification does not necessarily confer the right or privilege to practise. Individuals who hold the IBCLC credential must abide by the legal authority in the jurisdiction in which they practise or wish to practise. Candidates must meet the eligibility criteria outlined in this Guide, adhere to the *Code of Professional Conduct for IBCLCs*, as well as pass an examination in order to earn the IBCLC certification.

To maintain the IBCLC certification, certificants must recertify every five years. Five years after last passing the examination, IBCLC certificants have the option to recertify by completing 75 continuing education recognition points (CERPs) or equivalent individual CERPs OR re-examination. Re-examination is mandatory within 10 years after last passing the examination. The IBCLC must also complete basic life support education in this time frame, as well as 250 hours of practise in lactation consulting. Please review the Recertification Guide on IBLCE's website for further information about recertification requirements.

Please note: commencing with IBCLCs recertifying in 2022, the examination will remain an option for recertification but will no longer be a requirement. A self-assessment and required focused continuing education will be an option in lieu of examination at each five-year recertification period.

IBCLC certificants who let their certification lapse will have one examination attempt within one year immediately following their expiration year to sit the examination without having to meet the clinical hour and education requirements and must pay the full examination fee. For any subsequent examination attempts, lapsed candidates must meet all eligibility requirements for an initial candidate valid at the time of examination application and pay the full examination fee.

III. IBCLC Examination Eligibility Requirements

IBLCE requires that all IBCLC applicants must meet the following key components of the

IBCLC eligibility requirements irrespective of Pathway chosen.

A. Health Sciences Education

Education in health science subjects typically studied by health professionals during their professional education is required of all candidates.

Candidates must complete education in the 14 subjects described in the *Health Sciences Education Guide*. If one is educated in one of the professions on the *Recognised Health Professions List*, one meets this requirement. Or, one meets this requirement if one can provide evidence from a governmental authority that recognises the profession as a clinical health profession.

B. Lactation Specific Education

Comprehensive education in human lactation and breastfeeding is a vital part of preparing to become an IBCLC. Candidates are encouraged to secure education which covers all the disciplines and chronological periods listed on the *IBCLC Detailed Content Outline*.

IBLCE does not offer, approve, or accredit lactation education designed to prepare candidates for the certification examination. Nor does IBLCE recommend or endorse any particular programme or course in lactation education.

Communications Specific Education

In addition to the 90 hours of lactation specific education, five (5) hours of education focused on communication skills is required. Preferably, these five hours will be directly related to lactation and breastfeeding care, but this is not a requirement.

Communication is a key area in the [IBCLC Detailed Content Outline](#) and in practise, as IBCLCs must understand the client and provide the most appropriate plan of care, engage in active listening and emotional support, and assist the client in making informed decisions.

The IBCLC Detailed Content Outline outlines that candidates and certificants focus their study on communications areas such as:

- Active listening
- Anticipatory guidance
- Care plan development and sharing
- Documentation
- Educating mothers and families
- Educating professionals, peers, and students
- Extending the duration of breastfeeding
- Emotional support
- Empowerment

- Group support

Various general communications courses (i.e. not specifically related to lactation care) are also acceptable, such as:

- Foundations of Interpersonal Communication
 - Theories and principles of interpersonal communication emphasising models of communication, verbal and nonverbal message systems, and analysis of communicative relationships.
- Health Communication
 - Examines interpersonal communicative processes associated with health in consumer-provider, family, and health communication campaign contexts. Particular attention to understanding cultural differences in perceptions of and communication about health and disease.
- Consumer-Provider Health Communication
 - Explores relational health communication research and practise. Examines the role of interpersonal communication in health care delivery, health promotion, disease prevention, risk communication, as well as in promoting personal and psychosocial wellbeing.

Courses from the Health Science Education Guide cannot simultaneously count toward the health science requirement and the communication specific education requirement. You will need to decide how you want to use your communications class. If it is counted toward the 14 health science courses, then you will need to take another class for the communications requirement.

Please note: Courses in public speaking, media communications, marketing, and industrial or work psychology do not meet this requirement.

C. Lactation Specific Clinical Experience

All candidates must complete relevant clinical experience. Clinical skills are a key knowledge area and important for successful practise as a lactation consultant.

Lactation specific clinical experience is providing maternal/child care that supports breastfeeding families, including lactation assistance to pregnant and breastfeeding women and lactation education to families and/or professionals.

All reported lactation specific clinical experience must be supervised. Depending upon the eligibility pathway a candidate follows, clinical experience may need to be directly supervised. Please see page 26 of this guide for interim guidance related to COVID-19.

Candidates are encouraged to have a broad range of experience in providing lactation and breastfeeding care that spans the spectrum from pre-conception through weaning and encompasses an extensive variety of clinical skills. The IBCLC examination tests the application of knowledge in the disciplines listed on the *IBCLC Detailed Content Outline*.

Actual practise and provision of lactation and breastfeeding care is required. Observation or shadowing of lactation practitioners does not count as lactation specific clinical hours.

Clinical experience may include in-person consultations, telephone consultations, or online breastfeeding or lactation care.

D. Adherence to the Code of Professional Conduct for IBCLCs

The Code of Professional Conduct for IBCLCs and accompanying procedures are publicly available on the IBLCE website. The purpose of this is to define professional conduct for IBCLCs and to protect the public.

IV. Pathways to IBCLC Examination Eligibility

To be eligible to sit the IBCLC examination, one may pursue one of three pathways to meet the key eligibility components set forth above. One must meet the criteria through one of the following pathways to be eligible to sit for the IBCLC examination. The pathways are designed to ensure that all applicants have a health sciences background, a minimum of 95 hours of lactation specific education, five (5) hours of which must be communication specific education, as well as relevant clinical experience and adherence to the *Code of Professional Conduct for IBCLCs* by attestation. These three eligibility pathways permit individuals from a variety of diverse backgrounds to gain the knowledge and skills relevant to practise as an IBCLC. Further details may be found on the IBLCE website.

A. Pathway 1: Recognised Health Professionals and Recognised Breastfeeding Support Counsellors

Pathway 1 IBCLC candidates must practise as a *Recognised Health Professional* or provide breastfeeding support through a *Recognised Breastfeeding Support Counsellor Organisation*. In the case of applicants who provide breastfeeding support through a Recognised Breastfeeding Support Counsellor Organisation, they must have completed the 14 subjects set forth in the Health Sciences Education Guide. Additionally, all Pathway 1 candidates must have the following:

1. Minimum of 95 hours of lactation specific education within the **five years immediately** prior to examination application.
 - Five (5) hours of this education is to be focused on communication skills. Preferably these five hours will be directly related to lactation and breastfeeding care, but this is not a requirement.
2. Minimum of 1,000 hours of lactation specific clinical practise in an

appropriate supervised setting within the **five years immediately** prior to examination application.

3. Clinical practise is to be obtained in an appropriate supervised setting, to include the following:
 - Hospital
 - Birth Centre
 - Community Clinic
 - Lactation Care Clinic/Practice
 - Primary Care Practitioner's Practice/Office
4. Clinical practise hours can be earned through independent practise as a licensed/registered healthcare professional in non-healthcare settings.
5. For clinical practise, breastfeeding support counsellors from a *Recognised Breastfeeding Support Counsellor Organisation* must earn clinical hours in a delivery setting which meets the following criteria:
 - Provides structured training programmes for their counsellors which include comprehensive education in breastfeeding and lactation management
 - Has a Code of Ethics or Professional Conduct
 - Provides structured supervision for counsellors, with an appropriate level of training
 - Provides a continuing education programme for counsellors
6. **Please note:** Candidates associated with an *IBLCE Recognised Breastfeeding Support Counsellor Organisation* are to earn clinical hours on an hour-per-hour basis beginning on January 1, 2022. Please reference the *IBLCE Recognised Breastfeeding Support Counsellor Organisation* on the IBLCE website for detailed implementation information.
7. Whether one is a *Recognised Health Professional* or a breastfeeding support counsellor from a *Recognised Support Counsellor Organisation*, the 1,000 hours does not need to be **directly** supervised.
8. Adherence to, with attestation, the *Code of Professional Conduct for IBCLCs*.

B. Pathway 2: Accredited Lactation Academic Programmes

Pathway 2 IBCLC applicants must complete a comprehensive academic programme in human lactation and breastfeeding that is accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP) or another accrediting body with equivalent accreditation standards for lactation academic programmes. The programme must be accredited at the time of the candidate's completion.

These comprehensive lactation academic programmes are university- or college-based, include both didactic and clinical components, and require health sciences education, whether as a prerequisite or as education which must be earned

concurrently, prior to completion of the academic programme.

All Pathway 2 applicants, via their lactation academic programme, must have:

1. Minimum of 95 hours of lactation specific education within the **five years immediately prior** to examination application.
 - Five (5) hours of this education is to be focused on communication skills. Preferably these five hours will be directly related to lactation and breastfeeding care, but this is not a requirement.
2. Minimum of 300 hours of *directly supervised** lactation specific clinical practise within the **five years immediately prior** to examination application.
 - The IBCLC(s) providing the direct supervision must be currently certified IBCLCs in good standing.
3. Adherence to, with attestation, the *Code of Professional Conduct for IBCLCs*.

*Please see page 26 of this guide for interim guidance due to COVID-19.

Pathway 2 IBCLC applicants must have completed the accredited lactation academic programme within the five years immediately prior to their examination application. Please see the IBLCE website for more information on locating the current list of eligible Pathway 2 programmes. Contact the programme provider with any questions about its accreditation status.

C. Pathway 3: Mentorship with an IBCLC

Pathway 3 mentorship is a structured, defined relationship between an applicant and IBCLC(s) which must be preapproved. The mentorship must be developed according to the specifications found in the *Pathway 3 Plan Guide*, and the certification status of the IBCLCs serving as mentors must be verified by IBLCE prior to beginning the mentorship. **All Pathway 3 Plans MUST be verified by IBLCE through an application process (which includes a fee) PRIOR to earning clinical hours for this Pathway.**

In addition to the *Health Sciences Education* courses, Pathway 3 candidates must complete:

1. Minimum of 95 hours of lactation specific education within the **five years immediately prior** to examination application.
 - Five (5) hours of this education is to be focused on communication skills. Preferably these five hours will be directly related to lactation and breastfeeding care, but this is not a requirement.
2. Minimum of 500 hours of *directly supervised** lactation specific clinical practise as described in the *Pathway 3 Plan Guide* and obtained within the

five years immediately prior to examination application.

- The IBCLC(s) who provide the direct supervision must be currently certified IBCLCs in good standing.

3. Adherence to, with attestation, the *Code of Professional Conduct for IBCLCs*.

*Please see page 26 of this guide for interim guidance due to COVID-19.

The *Pathway 3 Plan Guide* can be found on the IBLCE website.

V. Important Publications for Examination Candidates

IBCLC examination candidates should be familiar with the following publications, all of which can be found on the IBLCE website.

- *IBCLC Detailed Content Outline*
- *Clinical Competencies for the Practice of International Board Certified Lactation Consultants (IBCLCs)*
- *Scope of Practice for International Board Certified Lactation Consultant (IBCLC) Certificants*
- *IBLCE Disciplinary Procedures*
- *IBLCE Appeals Policies (in the Candidate Information Guide and Recertification Guide) and Forms*
- *Code of Professional Conduct for IBCLCs*

VI. Applying to Sit the Examination

A. Choose Your Pathway

After determining their examination eligibility pathway, applicants should use the Pathway Checklist found at the end of this Guide to be sure they have met all requirements of that pathway and retain any documentation that verifies completion of the pathway requirements, as they will need to submit evidence if audited.

B. Complete an Online Application

The online application is available in the same languages as IBLCE offers the examination. Visit the IBLCE website and locate your language.

C. Fees and Payments

Complete information about the fees and payment options can be found at the end of this Guide.

D. IBCLC Examination Overview

The examination consists of 175 multiple choice questions. Each question has only one correct answer, and there is no penalty for a wrong answer. It is to your advantage to answer all questions. The examination is given in two parts, and most questions in Part Two are associated with an image. The standard IBLCE examination is of four (4) hours and two (2) minutes' duration, which includes a five (5) minute break between Part One and Part Two. Thirty extra minutes of time are allocated for test takers who attest that the examination is not offered in their primary language. Additional test time is provided for paper; the paper examination requires use of an examination booklet, a photo booklet as well as an answer sheet, whereas use of the computer-based testing system is more streamlined. The IBCLC examination consists of content related to the knowledge domains described in the *IBCLC Detailed Content Outline*.

E. Examination Sites

IBLCE offers computer-based testing (CBT) for the examination worldwide. Due to COVID-19, in 2020 IBLCE also offered the examination via Live Remote Proctoring in English, as this was the only language available at the time from the testing vendor. Please reference the [COVID-19 Resource Centre](#) for information and updates regarding testing modalities in 2021. In countries where CBT centres are not geographically available or in cases of substantiated reasonable accommodations, either pop-up site CBT testing locations or paper and pencil administration of the examination may be offered. Test centre locations can be viewed prior to applying for an examination, but please know that IBLCE's available test centre list changes periodically. Test centre availability will be most accurate at the time that you apply and go to schedule the examination appointment. IBLCE will notify you by email when you are able to schedule an appointment. Scheduling as soon as you receive this notice can assist you with finding the test centre of your choice.

F. Examination Security and Incident Review Protocols

The IBCLC examination is offered in secure testing environments in order to maintain the integrity of the examination and the IBCLC certification programme. IBLCE examination administrations follow security and confidentiality protocols.

IBLCE reviews incidents during examination administrations, and after the examinations, to follow up as needed to determine the nature of the incident and to seek resolution as applicable.

G. Reasonable Accommodations

IBLCE works with candidates to provide reasonable accommodations during the examination administration for medical conditions and disabilities. The IBCLC examination application form asks the candidate whether they seek reasonable accommodation for the examination, or whether or not a personal medical item may be needed during the examination. If the candidate answers in the affirmative, IBLCE reaches out to the candidate and asks the candidate to submit a request form and third-party documentation. Such third-party documentation must directly link the requested reasonable accommodation(s) to the verified health condition(s).

To allow sufficient time for making reasonable accommodations, candidates must notify IBLCE of their requests at the time they apply for the examination. If an issue arises after submitting the examination application, candidates should report the request to IBLCE as soon as possible.

H. Special Note for Pregnant Candidates

Candidates who experience health difficulties that may interfere with their ability to take the examination must notify IBLCE as soon as possible. In some circumstances, due to health complications, candidates may need to cancel or withdraw from the examination.

There are financial implications for cancelling/withdrawing from the examination. The IBLCE office staff can assist candidates in making informed decisions.

I. Breast/Chestfeeding During Examination Administration

The International Board of Lactation Consultant Examiners (IBLCE) is devoted to lactation and breast/chestfeeding care. Therefore, it is appropriate for IBLCE to provide the opportunity for examination candidates who are breast/chestfeeding to breast/chestfeed or express milk during the IBCLC examination while at the same time maintaining examination security. It is necessary that these allowances meet all the requirements for ensuring IBLCE examination security while at the same time offering reasonable solutions that will allow test takers to breast/chestfeed or pump during the examination appointment. Therefore, a break will be permitted for breast/chestfeeding or expressing milk after the first part of the examination, but no additional examination seat time for testing will be permitted. Additionally, all examination candidates, inclusive of those breast/chestfeeding or expressing milk, may not return to the first part of the examination after its completion.

Candidates requesting a breast/chestfeeding break during the examination should read the *Procedures for Breast/Chestfeeding During Examination* found on the IBLCE website.

J. Non-Primary Language

The IBCLC examination is translated into a wide range of languages. For candidates or certificants whose primary language, as attested to on the IBCLC application, is not among those into which the IBCLC examination is translated, IBLCE will provide extra examination time of 30 minutes.

VII. Confidentiality Policy

A. Commitment to Confidentiality

IBLCE is committed to protecting confidential and/or proprietary information related to applicants, candidates, certificants, the examination development process, and examination content. IBLCE will not disclose any confidential applicant, candidate, or certificant information unless authorized in writing by the individual or as required by law.

B. Examination Results

Individual examination results are considered confidential. Examination scores are released only to the individual candidate unless a signed release is provided in advance. Results are not released by phone or fax. Personal information submitted by applicants, candidates, and certificants with an application for initial certification or recertification is considered confidential.

C. Application Status

An individual's application status is considered confidential. IBLCE does not disclose information regarding whether or not an individual has applied for certification or has taken the examination. Current certification status is published and verifiable as noted in the Credential Verification section of this policy.

D. Credential Verification

The names of certified individuals are not considered confidential and may be published by IBLCE. Published information may include name, city, state, country, and certification status. An online Registry of certificants is provided to the public. Employers may also receive written verification provided that IBLCE has received a signed release from the certificant.

E. De-Identified Data

To promote and support research within the human lactation and breastfeeding field, IBLCE will, upon approval by the IBLCE Research Committee, provide aggregated and de-identified data. To achieve these goals and aims, IBLCE reserves the right to use a combination of de-identified data, including but not limited to examination results, to evaluate performance, testing, and administration strategies for research and evaluation purposes. IBLCE may also disseminate approved surveys and questionnaire-type requests to its constituents to complete at their own will.

F. Examination Candidates

IBLCE examination candidates are prohibited from transmitting information about IBLCE examination questions or content in any form to any person or entity at any time, either prior to, during, or following the examination, and failure to comply with this prohibition, or failure to report any information about suspected violations of such prohibitions or otherwise about any possible examination irregularities by themselves or others, may result in their scores being cancelled or their certification being revoked in accordance with IBLCE policies and procedures and/or legal action against the candidate, including criminal prosecution.

VIII. Initial Candidate and Recertification Audit Policy

IBLCE audits initial applications and recertification applications. These audits are conducted on a standardised and randomised basis. If selected for such an audit, the applicant or certificant must furnish the complete, accurate information in a timely manner. Failure to do so may result in a delay or denial to sit the IBCLC examination and/or disciplinary action pursuant to the Code of Professional Conduct and/or suspension or revocation of the opportunity to reapply for certification.

In addition to the randomised and standardised audit process set forth above, IBLCE specifically further reserves the right to require any applicant or recertificant to provide proof of education, employment, coursework, or proof of any of the initial eligibility or recertification requirements in a timely manner and be complete and accurate. Such failure to do so could also result in a delay or denial to sit the IBCLC examination and/or disciplinary action pursuant to the Code of Professional Conduct and/or suspension or revocation of the opportunity to reapply for certification.

IX. Notification of Examination Eligibility

Applicants who successfully meet all requirements will be notified by email of their eligibility to take the examination. This eligibility notification will include information

about examination centre locations and examination day procedures. Applicants who do not meet the examination eligibility requirements will be notified by email and will be eligible for a partial refund of examination fees paid.

X. Policy for Appealing an Eligibility or Recertification Decision

IBLCE will review appeals of adverse certification eligibility or recertification decisions from IBCLC certificants and applicants. An adverse decision may be appealed for the following reasons: 1) IBLCE did not apply certification or recertification criteria correctly or 2) a factual error impacted the underlying decision.

A missed deadline may be appealed only due to substantiated and verified extraordinary circumstances. Certificants or applicants who wish to do so should submit the Appeals Form. The requirements associated with this process are described below.

Extraordinary circumstances are exclusively serious illness or severe injury of the candidate/certificant or immediate family member, death of an immediate family member, experiencing unavoidable natural disaster, or changes related to active military duty. Due to COVID-19, additionally in 2021, extraordinary circumstances include COVID-19 related concerns, such as job loss of the candidate and/or partner/spouse, COVID-19 health issue for candidate or immediate family member, and/or concern for going into the public due to COVID-19.

Certificants or applicants who are determined to be ineligible to take the examination or ineligible to recertify by CERPs will be notified by IBLCE. ***All appeals must be submitted to IBLCE within 30 days of the date of the notification of ineligibility.***

Appeals are evaluated by the IBLCE Appeals Committee, which considers the executed appeals form together with information submitted in support of the appeal. ***In signing the appeals form, the certificant or applicant acknowledges that the decision of the IBLCE Appeals Committee is final.***

XI. Examination Withdrawal/Cancellation

If a candidate must withdraw from the IBCLC examination for which they had applied and were accepted, and/or cancel their appointment to take the IBCLC examination, the candidate **MUST** notify IBLCE in writing by the posted deadlines to be eligible for a partial refund. After the posted deadlines, no partial refunds will be given to candidates who withdraw/cancel from the IBCLC examination. Only documented extraordinary circumstances will be accepted as reasons for IBLCE to consider a request for the fees paid to be deferred to a future examination. Review the *IBCLC Examination Withdrawal/Cancellation Policy* on the IBLCE website for further details.

Due to COVID-19, IBLCE, additionally in 2021, is providing for a request for a full refund with documented extraordinary circumstances according to posted deadlines. Please visit the [COVID-19 Resource Centre](#) for further information.

XII. Examination Rescheduling Policy

Examination candidates who must reschedule their appointments may do so by the posted deadlines on IBLCE's website. After these dates, candidates will not be allowed to reschedule their appointments. Only under extraordinary circumstances will examination candidates be considered to reschedule. IBLCE must be notified if an appointment needs to be rescheduled after these dates. Such decisions on rescheduling are determined solely by IBLCE.

Once you have successfully rescheduled your appointment, you will receive a rescheduling confirmation email. Failure to show up to your testing centre will result in loss of examination fees. **Examination candidates can only be rescheduled for the examination for which they have been accepted.**

XIII. Examination Admissions Procedures and Candidate Conduct

To gain admission to the examination, candidates must present TWO (2) forms of identification. The primary ID must be a valid, unexpired government-issued identification that includes the candidate's name, current photograph, and signature, and the secondary ID must have either their name and signature or their name and current photograph.

The **FIRST** form of identification **MUST** be one of the following government-issued IDs:

- driver's license with photograph
- international/national/regional/local identification card with photograph
- passport with photograph
- military identification card with photograph
- green card permanent residence card or visa with photograph

The **SECOND** form of identification **MUST** display the candidate's name and signature or name and current photograph. Acceptable forms of secondary ID include but are not limited to:

- credit card
- social security card
- employment/student ID card
- professional license
- health insurance cards

Please Note: Candidates who do not have these two forms of identification must contact IBLCE before the examination day to learn of their options. The names on the IDs must match and must be the same name as the one on file with IBLCE. Candidates who need to update or make changes to their name **MUST** contact IBLCE with these changes by the deadline listed in examination authorisation email; however, the IDs must match at the time of examination check-in.

Candidates should allow adequate time for arrival at the examination site. Candidates are encouraged to arrive at the test centre 30 minutes prior to the scheduled appointment. This should give candidates adequate time to complete the necessary sign-in procedures.

Candidates who arrive more than 30 minutes late for their appointment will be refused admission and examination fees will be forfeited. Likewise, candidates who fail to register at the examination site on the day of the examination will forfeit all rights to any refund of examination fees. Failure to make an appointment by the posted deadlines will result in the forfeiture of the examination fees paid.

Each examination site will be supervised and monitored by one or more test centre administrators/IBLCE Examination Proctors. Candidates are expected to follow the rules announced by the test centre administrators/IBLCE Examination Proctors. The rules are in place to ensure that the examination administration is as free as possible from distractions and that all candidates are treated fairly. The test centre administrators/IBLCE Examination Proctors will designate a location where personal belongings such as purses are to be stored during the exam. During the examination administration, test centre administrators/IBLCE Examination Proctors will be monitoring the room for any signs of cheating or other inappropriate behaviour.

Candidates may not leave the test centre during the examination administration or breaks. Leaving the test centre will result in an immediate dismissal from the exam. You will not be allowed to use your mobile/cell phone or electronic devices during the examination or during any breaks that you take during the examination administration. Candidates found in possession of and/or using such devices during the examination or during breaks will be dismissed and their examinations will not be scored. Candidates who bring their cell phones or other electronic devices to the examination site must power them off (putting them on silent/mute is not sufficient) and store them in the place designated by the test centre administrator/IBLCE Examination Proctor. [Please note: Neither the test centre administrators/IBLCE Examination Proctors nor IBLCE are responsible for candidates' personal property.]

Talking to another examination candidate is not permitted during the exam. Questions regarding the examination administration will be answered by the test centre administrator/IBLCE Examination Proctor during orientation. Questions concerning the examination content are not permitted. Test centre administrators/IBLCE Examination

Proctors are not allowed to provide interpretation or clarification of examination questions. Cheating will not be tolerated and if found cheating, it will result in a candidate's scores being cancelled or their certification being revoked in accordance with IBLCE policies and procedures and/or legal action against the candidate, including criminal prosecution.

Additionally, candidates may not discuss any examination questions after the examination with anyone, even those who also took the examination, as indicated in the *Confidentiality Policy* located in this Guide.

Please note: candidates will be asked to agree to Test Centre Regulations upon arrival to the test centre. If a candidate does not comply with these regulations, then they may be dismissed from the examination with forfeiture of the examination fees paid, including invalidation of the test score and/or pursuit of civil or criminal charges.

The examination will be administered in multiple-choice format either by computer or by paper and pencil. For computer-based testing, the candidate will view and answer questions on the computer provided. For paper and pencil testing, the examination questions will be provided in a booklet, together with a photo booklet, and answers must be recorded on an answer sheet using a pencil.

XIV. Examination Results Notification

Official examination results will be provided to candidates two to three months following the exam. Candidates who pass the examination will also receive their IBCLC certificate, along with their examination score report. For examination security reasons, IBLCE does not make individual questions available following the examination.

XV. Policy on Requesting a Hand Score

If taken as a paper and pencil examination, scoring of the IBLCE examination is based on optical scanning of candidates' answer sheets. For computer-based testing, the candidate's response is electronically evaluated against the answer key provided by IBLCE. Candidates who believe that their exams were not scored correctly may request hand verification of their answer sheets or a re-scoring of their computer-based testing responses.

All hand score requests must be submitted within 30 days following the date that the examination results were disseminated. The Hand Score Request Form can be downloaded from the IBLCE website. **There is a fee associated with a Hand Score Request.** This fee will be refunded if it is determined that the candidate's examination was scored incorrectly.

XVI. Policy for Appealing an Examination Outcome

IBLCE will review appeals of adverse certification decisions from examination candidates. An adverse decision may be appealed for the following reasons: (1) alleged inappropriate examination administration procedures, (2) environmental testing conditions severe enough to cause a major disruption of the examination process and/or other irregularities. Appeals regarding the following will NOT be accepted: (1) the determination of the passing score, (2) the examination or individual test items, or (3) test content validity. Any examination outcome appeal should be as specific as possible, detailing the basis of the appeal.

The Examination Outcome Appeals Form should be submitted to initiate this request. **All Examination Outcome Appeals must be submitted within 30 days following the date that the examination results were disseminated.**

In evaluating an appeal, IBLCE considers the executed appeal form and supporting documentation filed with the appeal as well as additional relevant information. ***In signing the appeals form, the candidate acknowledges that the decision of the IBLCE Appeals Committee is final.***

A favourable appeal results ONLY in the deferral of the examination fees to a future examination arranged with adequate future notice.

XVII. Examination Retest Policy

There is no limit to the number of times an unsuccessful candidate may apply to retest the IBCLC certification examination. Applicants who plan to retest the examination should carefully review their examination score report and consider completing education in those areas of the examination in which their performance was poor. To be eligible to take the examination again, a candidate must meet current eligibility requirements, submit an application for the applicable examination, and pay the relevant examination fee. The rationale for the retesting policy is that candidates are encouraged to affirmatively address areas of deficiency prior to retaking the examination.

If a candidate fails the IBCLC examination, then they are eligible to receive a 50% discounted examination retest fee for the next three examination attempts or up to three years following the first time they do not pass. Both initial and recertification examination candidates are eligible for the discounted rate.

XVIII. IBCLC Registry

IBLCE reserves the right to publish the names of current IBCLCs. This Registry can be found on the IBLCE website.

XIX. Nondiscrimination Policy

IBLCE does not and shall not discriminate on the basis of race, colour, religion, sect, gender, gender identity, sexual orientation, sex, ethnicity, age, national origin, ancestry, political persuasion, ability/disability, marital status, geographic location, or socioeconomic status in any of its activities or operations or any other basis prohibited by the laws of the United States of America or of the Commonwealth of Virginia. IBLCE is committed to providing an inclusive and welcoming environment for all members of the IBLCE community, as well as all seeking access to the IBLCE community.

XX. IBCLC Trademark Use Policy

The International Board of Lactation Consultant Examiners (“IBLCE”) owns certain names, trademarks, and logos, including the certification marks International Board Certified Lactation Consultant and IBCLC Logo (the “Marks”). Only those individuals who have met the IBLCE eligibility requirements, passed the IBLCE examination, and maintained the IBCLC certification may use the Marks. Use of the Marks may only be made in accordance with the *IBCLC Trademark Use Policy* and its terms and conditions which can be found on the IBLCE website.

XXI. Pathway Checklist if Randomly Selected for Audit

The following checklist outlines the requirements and the documentation that will be required if the application is selected for audit.

A. Pathway 1: Recognised Health Professionals and Recognised Breastfeeding Support Counsellors

- Health Sciences Education Courses: complete all 14 required courses
 - Individuals educated in one of the Recognised Health Professions may submit a copy of their license, registration, transcript, diploma, or degree as evidence of completion of the 14 courses.
 - Individuals who are not Recognised Health Professionals may submit copies of their transcript(s) and certificates as evidence of completion of the 14 courses.
- Lactation Specific Education: complete 95 hours of education
 - Certificates or a transcript may be submitted as evidence of completion of the required 95 hours of instruction.
 - Including Communication Specific Education: complete five (5) hours of education
- Lactation Specific Clinical Experience: complete a minimum of 1,000 hours
 - Provide information about the number and timeframe of the hours and settings

in which the clinical hours were earned. Candidates may complete the *Lactation Specific Clinical Practise Calculator* from the website as proof of practise hours.

B. Pathway 2: Accredited Lactation Academic Programmes

- Health Sciences Education Courses: complete all 14 required courses
 - Individuals educated in one of the Recognised Health Professions may submit a copy of their license, registration, transcript, diploma, or degree as evidence of completion of the 14 courses.
 - Individuals who are not Recognised Health Professionals may submit copies of their transcript(s) and certificates as evidence of completion of the 14 courses.
- Complete an accredited lactation academic programme (specifically listed on the accreditor's website as a recognised Pathway 2 Programme) that integrates the following in the curriculum:
 - 95 hours of Lactation Specific Education
 - Including Communication Specific Education: complete five (5) hours of education
 - 300 hours of directly supervised Lactation Specific Clinical Experience
- A copy of your transcript, certificate, or a letter from the lactation academic programme director may be submitted as evidence of completion from the academic programme.

C. Pathway 3: Mentorship with an IBCLC

- Have a verified Pathway 3 Plan on file with IBLCE
- Health Sciences Education Courses: complete all 14 required courses
 - Individuals educated in one of the Recognised Health Professions may submit a copy of their license, registration, transcript, diploma, or degree as evidence of completion of the 14 courses.
 - Individuals who are not Recognised Health Professionals may submit copies of their transcript(s) and certificates as evidence of completion of the 14 courses.
- Lactation Specific Education: complete 95 hours of education
 - Certificates or a transcript may be submitted as evidence of completion of the required 95 hours of instruction.
 - Including Communication Specific Education: complete five (5) hours of education
- Lactation Specific Clinical Experience: complete a minimum of 500 directly supervised hours as outlined in your Pathway 3 Plan
 - Provide information about the number and timeframe of the hours and settings in which the clinical hours were earned. Candidates may use

the logs and time sheets provided in the *Pathway 3 Plan Guide*.

XXII. 2020-2021 Updated Interim Guidance on the Use of Technology to Meet Pathways 1, 2, and 3 Clinical Practise Requirements

A. Relevant Background

The International Board of Lactation Consultant Examiners® (IBLCE®) previously released an Advisory Opinion on Telehealth focusing on the provision of lactation consultant services to consumers in alignment with IBCLC® guiding practise documents inclusive of the Scope of Practice for International Board Certified Lactation Consultant® (IBCLC®) Certificants (dissemination and effective date December 12, 2018), the Code of Professional Conduct for IBCLCs (effective November 1, 2011 and updated September 2015), and the Clinical Competencies for the Practice of International Board Certified Lactation Consultants (IBCLCs) (dissemination and effective date December 12, 2018).

For a variety of reasons, inclusive of accessibility but most pertinently the onset of COVID-19, on April 17, 2020, IBLCE issued Interim Guidance on the Use of Technology to Meet Pathway 1 and 2 Clinical Practise Requirements. This interim guidance was intended to clarify and inform IBLCE stakeholders regarding the use of technology to meet the lactation specific clinical practise requirement pursuant to IBCLC Pathway 1 (Recognised Health Professional or Recognised Breastfeeding Support Counsellor Organisation) and Pathway 2 (Accredited Lactation Academic Programmes). At that time, IBLCE indicated it would be providing similar information in due course with respect to Pathway 3 (Mentorship with an IBCLC).

Therefore, IBLCE is issuing this Updated Interim Guidance on the Use of Technology to Meet Pathways 1, 2, and 3 Clinical Practise Requirements and it supersedes and replaces the previous interim guidance issued on April 17, 2020. On October 6, 2020, IBLCE further extended the timeframe for this Interim Guidance to September 30, 2021, with no substantive changes made at this time.

B. Key Prefatory Notes

1. Adherence to IBLCE Advisory Opinion on Telehealth

Candidates seeking to meet IBCLC eligibility requirements via Pathway 1, Pathway 2, or Pathway 3, as well as those providing oversight of clinical practise, must carefully review and follow IBLCE's Advisory Opinion on Telehealth. That opinion provides important information relevant to the use of technology with respect to IBCLC lactation specific clinical practise via Pathway 1, Pathway 2, and Pathway 3. IBCLCs providing clinical supervision must adhere both to the laws in their jurisdiction of practise as well as to the relevant IBCLC guiding practise documents inclusive of the Scope of Practice for International Board Certified Lactation Consultant® (IBCLC®) Certificants (dissemination and effective date December 12, 2018), the Code of Professional

Conduct for IBCLCs (effective November 1, 2011 and updated September 2015), and the Clinical Competencies for the Practice of International Board Certified Lactation Consultants (IBCLCs) (dissemination and effective date December 12, 2018).

That advisory opinion also makes clear that an IBCLC should particularly consider how one's provision of lactation consulting services via telehealth is in alignment with the key provisions of the aforementioned guiding practice documents inclusive of privacy, security, assessment, demonstration and evaluation of relevant techniques, provision of evidence-based information to clients, as well as appropriate collaboration with, or referral to, other healthcare providers. Particularly emphasised is Principle 3.2 of the Code of Professional Conduct which requires advance written consent from the breastfeeding parent prior to photographing, recording, or taping (audio or video) that parent or the child.

The information provided in the Advisory Opinion on Telehealth also applies to clinical supervision by IBCLCs as well as those pursuing the IBCLC via Pathway 1, Pathway 2, and Pathway 3 and is incorporated by reference into this interim guidance document.

2. The Use of Technology in Clinical Supervision

Technology can be used in the context of clinical supervision and is particularly important due to public health considerations such as are currently being experienced worldwide, but also due to accessibility issues.

However, use of technology in the context of clinical supervision does require enhanced communication, additional planning, and a focus on technological and administrative details, as well as a sound grasp of the legal requirements in not just one, but two locations and thus possibly two jurisdictions. Key considerations include security, most particularly of technological platforms, privacy including sensitive health data as well as detailed informed consent. Those making use of technology in clinical supervision should also give careful consideration to the reliability of potential platforms. Basic to intermediate competency should be achieved by all parties using the platform prior to its utilisation. Moreover, considerable thought and planning should be devoted to assuring that the clinical supervision is designed to create a realistic clinical experience.

Those seeking to leverage technology to provide clinical supervision, if not already experienced in this type of supervision, should pursue training or independent study in this approach to knowledgably and competently provide effective clinical supervision similar to that which would be offered in person. There are a number of peer-reviewed resources in this regard including some specifically related to telelactation.

3. Relationship of IBLCE Interim Guidance to Pathway 1, Pathway 2, and Pathway 3

It is important to note that this document does not substantively change IBLCE's existing clinical practise eligibility requirements with respect to Pathway 1, Pathway 2, and Pathway 3 but simply provides information on how IBLCE's Pathway 1, Pathway 2, and Pathway 3 clinical eligibility requirements can be met by leveraging technology.

4. Relationship of IBLCE Interim Guidance to the IBCLC Candidate Information Guide

It is critical to note that due to the exigent circumstances associated with the current global pandemic, it is not feasible for IBLCE to quickly edit and translate the entirety of the IBCLC Candidate Information Guide nor the website into 16 languages so as to align with this interim guidance document. Therefore, this interim guidance should be read in conjunction with the Candidate Information Guide and to the extent information contained in the Candidate Information Guide conflicts, or is silent, with the guidance contained in this document, this interim guidance shall govern.

It should also be carefully noted that this is interim guidance only. Due to the continued impact of the global COVID-19 pandemic, this Interim Guidance is extended from the previously announced date of November 2020 to September 30, 2021. IBLCE will continue to evaluate and refine this policy and further findings will be presented in the coming months.

C. IBCLC Certification Eligibility Pathways

As noted above, the International Board Certified Lactation Consultant (IBCLC) credential may be accessed through three pathways. It should be noted that current requirements for the IBCLC already contemplate, in a number of ways, the use of technology to meet IBCLC requirements. For example, many candidates pursuing the IBCLC through each of the three pathways meet the current 90-hour lactation specific education requirement through online education.

Therefore, this interim guidance document is limited solely to how one can meet the clinical practise requirements of Pathway 1, Pathway 2, and Pathway 3.

D. Interim Guidance

1. Pathway 1 and the Use of Technology for Lactation Specific Clinical Practise

Pathway 1 provides that candidates must practise as a Recognised Health Professional or provide breastfeeding support through a Recognised Breastfeeding Support Counsellor Organisation and earn a minimum of 1000 hours of lactation specific clinical practise in an appropriate supervised setting within the five years immediately prior to examination application. Pathway 1 clinical practise hours currently allow for the use of technology in the following ways:

- Clinical practise must be obtained in an appropriate supervised setting which does not need to be directly supervised (further defined in IBLCE’s Candidate Information Guide page 8). If the appropriate supervised setting allows for the use of telehealth or other technologies to provide breastfeeding and lactation care, then this is an acceptable way to earn these clinical hours.
- Breastfeeding support counsellors from a Recognised Breastfeeding Support Counsellor Organisation must earn clinical practise hours in a delivery setting which meets the criteria outlined by IBLCE and may include telehealth or the use of other technologies as an option for providing services. For those volunteer accredited breastfeeding support counsellors using the flat-rate hour calculations to earn the needed 1000 hours of clinical practise, all modality types of care can count toward the flat-rate of 500 hours per 12 months. The 250 hours per 12 months rate for telephone and/or online care is increasing to 500 hours per 12 months.

2. Pathway 2 and the Use of Technology for Direct Supervision of Lactation Specific Clinical Practise

Students in Pathway 2 programmes may earn 100% of their minimum of 300 hours of directly supervised lactation specific clinical practise through technology platforms.

3. Pathway 3 and the Use of Technology for Direct Supervision of Lactation Specific Clinical Practise

Candidates in Pathway 3 mentorship programmes may earn 100% of their minimum of 500 hours of directly supervised lactation specific clinical practise through technology platforms.

XXIII. Examination Day Notice

By taking the IBCLC examination, you agree to assume all of the risks including, without limitation, any and all damage, loss, claim, or expense of any kind related to the exposure to or infection by COVID-19, and agree to release IBLCE, its officers, directors, employees, volunteers, contractors, and agents, from any and all liability, loss, damage, claim, or expense claimed by you or on your behalf, arising out of or in any way relating to your IBCLC examination. You agree to release, discharge, indemnify, defend, and hold harmless IBLCE and its officers, directors, employees, volunteers, contractors, and agents, from any and all loss, damage, claim or expense arising out of or in any way relating to your IBCLC examination.

To ensure your safety and the safety of other test takers and test centre staff, you agree that you will not be allowed to take and that you will not try to take your scheduled IBCLC examination at a contracted test centre if: (i) you have experienced any symptoms of COVID-19 or the flu or cold-like symptoms in the 14 days prior to your scheduled examination, (ii) you have tested

positive for COVID-19 in the 14 days prior to your scheduled examination, (iii) you have been in close personal contact with anyone in the 14 days prior to your scheduled examination that has been diagnosed with COVID-19*, (iv) you have returned from travel from a highly infected area within the preceding 14 days.**

IBLCE reserves the right to bar entrance at any contracted test centre to any individual who cannot or will not respond affirmatively to the four requirements above or who exhibits symptoms of COVID-19 or to any requirements listed by Prometric on its website through the IBCLC examination dates. You will be required to comply with any mandatory safety procedures while taking the IBCLC examination and IBLCE reserves the right to require the immediate removal of any individual who refuses to comply with any mandatory safety procedures. By taking your IBCLC examination, you acknowledge and agree that you are taking the examination at your own risk and that you expressly assume any risk with a full understanding of the contagious nature of COVID-19.

For those taking the examination by live remote proctoring from a residence or other location, please note that successfully accessing the confidential IBCLC examination will depend on a strong and reliable internet connection and computer equipment meeting the specifications as defined by IBLCE's third-party testing vendor, Prometric. IBLCE and its testing vendor Prometric are making live remote proctoring available in this unique situation and have taken reasonable and diligent steps to deliver the examination. However, if your internet connection is subject to disruption at your location or your computer does not perform properly, this is outside of the control of IBLCE or Prometric and IBLCE policies will govern. IBLCE and Prometric will not be responsible for such technical problems caused by local internet connectivity or other local computer related issues and you agree to waive any claims and hold harmless IBLCE and Prometric with respect to any such issues.

To understand how IBLCE processes your personal data for purposes of the exam, please review our [Privacy Notice](#).

*Medical and healthcare professionals who have been practicing safe and preventative measures using personal protective equipment with their patients are an exception.

**Highly infected areas subject to travel restrictions/quarantine requirements are typically identified at the local level via orders, directives, or guidelines. Please consult with local requirements on restricted travel in the location you wish to test.

XXIV. 2021 Fee Schedule

A. IBLCE 2021 Fee Schedule for Initial Certification for Tier 1 Countries

Tier 1	Andorra, Aruba, Australia, Austria, Bahamas, Bahrain, Belgium, Bermuda, Brunei Darussalam, Canada, Cayman Islands, Chile, Croatia, Curacao, Cyprus, Czech Republic, Denmark, Estonia, Falkland Islands, Finland, France, Germany, Gibraltar, Greece, Greenland, Guadeloupe, Guam, Hong Kong, Hungary, Iceland, Ireland, Israel, Italy, Japan, Kazakhstan, Kuwait, Latvia, Liechtenstein, Lithuania, Luxembourg, Macau, Malaysia, Malta, Martinique, Monaco, Netherlands, New Caledonia, New Zealand, Norway, Oman, Panama, Poland, Portugal, Puerto Rico, Qatar, Reunion, Romania, Russian Federation, San Marino, Saudi Arabia, Seychelles, Singapore, Slovakia, Slovenia, South Korea, Spain, St. Kitts and Nevis, St. Maarten, Sweden, Switzerland, Taiwan, Trinidad and Tobago, Turkey, United Arab Emirates, United Kingdom, United States, Virgin Islands (British), Virgin Islands (US)
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*If your country is not listed, please contact IBLCE at iblce@iblce.org.

Currency	Initial/Lapsed Examination Fee	Examination Retest Fee	Pathway 3 Plan Submission	Hand Score Fee	Refund for Initial Examination Candidates who are ineligible or withdraw by the specified deadline
USD	\$660	\$330	\$100	\$100	\$330

Please visit iblce.org for up-to-date information about application deadlines.

The online examination application system requires USD and the rate is based on the exchange rate for that day. The system accepts credit cards and prepaid credit cards.

B. IBLCE 2021 Fee Schedule for Initial Certification for Tier 2 Countries

Tier 2	Albania, Algeria, American Samoa, Anguilla, Antigua and Barbuda, Argentina, Armenia, Azerbaijan, Barbados, Belarus, Belize, Bhutan, Bolivia, Bosnia and Herzegovina, Botswana, Brazil, Bulgaria, Cape Verde, China, Colombia, Cook Islands, Costa Rica, Dominica, Dominican Republic, Ecuador, Egypt, El Salvador, Equatorial Guinea, Fiji, French Polynesia, Gabon, Georgia, Grenada, Guatemala, Guyana, India, Indonesia, Iraq, Jamaica, Jordan, Kosovo, Laos, Lebanon, Libya, Maldives, Mauritius, Mexico, Moldova, Mongolia, Montenegro, Montserrat, Morocco, Namibia, North Macedonia, Northern Mariana Islands, Palau, Paraguay, Peru, Philippines, Serbia, South Africa, Sri Lanka, St. Lucia, St. Martin, St. Vincent and the Grenadines, Suriname, eSwatini, Thailand, Tunisia, Turkmenistan, Ukraine, Uruguay, Uzbekistan, Venezuela, Viet Nam
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*If your country is not listed, please contact IBLCE at iblce@iblce.org.

Currency	Initial/Lapsed Examination Fee	Examination Resit Fee	Pathway 3 Plan Submission	Hand Score Fee	Refund for Initial Examination Candidates who are ineligible or withdraw by the specified deadline
USD	\$400	\$200	\$75	\$90	\$200

Please visit iblce.org for up-to-date information about application deadlines.

The online examination application system requires USD and the rate is based on the exchange rate for that day. The system accepts credit cards and prepaid credit cards.

C. IBLCE 2021 Fee Schedule for Initial Certification for Tier 3 Countries

Tier 3	Afghanistan, Angola, Bangladesh, Benin, Burkina Faso, Burundi, Cambodia, Cameroon, Central African Republic, Chad, Comoros, Cote D'Ivoire, Democratic Republic of the Congo, Djibouti, Eritrea, Ethiopia, Federated States of Micronesia, Gambia, Ghana, Guinea, Guinea-Bissau, Haiti, Honduras, Kenya, Kiribati, Kyrgyzstan, Lesotho, Liberia, Madagascar, Malawi, Mali, Marshall Islands, Mauritania, Mozambique, Myanmar (Burma), Nepal, Nicaragua, Niger, Nigeria, North Korea, Pakistan, Papua New Guinea, Republic of the Congo, Rwanda, Samoa, Senegal, Sierra Leone, Solomon Islands, Somalia, South Sudan, Sudan, Syria, Tajikistan, Timor-Leste, Togo, Tonga, Tuvalu, Uganda, United Republic of Tanzania, Vanuatu, Western Sahara, Yemen, Zambia, Zimbabwe
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*If your country is not listed, please contact IBLCE at iblce@iblce.org.

Currency	Initial/Lapsed Examination Fee	Examination Resit Fee	Pathway 3 Plan Submission	Hand Score Fee	Refund for Initial Examination Candidates who are ineligible or withdraw by the specified deadline
USD	\$255	\$127.50	\$50	\$70	\$127.50

Please visit iblce.org for up-to-date information about application deadlines.

The online examination application system requires USD and the rate is based on the exchange rate for that day. The system accepts credit cards and prepaid credit cards.

XXV. IBCLC Detailed Content Outline

 International Board of Lactation Consultant Examiners (IBCLE) International Board Certified Lactation Consultant® (IBCLC®) Detailed Content Outline	# of Items
I. Development and Nutrition	26
A. Infant	
<ol style="list-style-type: none"> 1. Feeding behaviours at different ages 2. Food intolerances/allergies 3. Infant anatomy and anatomical/oral challenges 4. Introducing complementary foods 5. Low birth weight 6. Milk banking – formal and informal 7. Normal infant behaviours 8. Nutritional requirements - preterm 9. Preterm development and growth 10. Skin tone, muscle tone, reflexes 11. Term development and growth 12. WHO growth charts with gestational age adjustment 	
B. Maternal	
<ol style="list-style-type: none"> 1. Breast development and growth 2. Breast surgery 3. Composition of human milk 4. Maternal anatomical challenges 5. Maternal nutritional status 6. Nipple structure and variations 	
II. Physiology and Endocrinology	24
<ol style="list-style-type: none"> 1. Diabetes 2. Infertility Issues 3. Maternal metabolic and hormonal disorders (e.g., thyroid, Polycystic Ovarian Syndrome) 4. Maternal autoimmune disorders 5. Multiples 6. Newborn hypoglycemia 7. Pregnancy and breastfeeding – tandem 8. Relactation 9. Stooling and voiding 	
III. Pathology	31
A. Infant	
<ol style="list-style-type: none"> 1. Allergies 2. Ankyloglossia 3. Cleft lip and palate 4. Congenital anomalies (e.g., gastrointestinal, cardiac) 	

	International Board of Lactation Consultant Examiners (IBCLE) International Board Certified Lactation Consultant® (IBCLC®) Detailed Content Outline	# of Items
	5. Gastroesophageal Reflux Disease (GERD), reflux 6. Hyperbilirubinemia 7. Infant acute disease (bacterial, viral, fungal, systemic) 8. Infant neurological disabilities 9. Small for Gestational Age (SGA), Large for Gestational Age (LGA)	
	B. Maternal	
	1. Abscess 2. Milk ejection reflex dysfunction 3. Maternal acute disease (bacterial, viral, fungal, systemic) 4. Maternal chronic disease 5. Maternal disability (physical and neurological) 6. Mastitis 7. Milk supply, low or over 8. Nipple and breast conditions 9. Nipple pain and trauma 10. Post-partum hemorrhage 11. Pre-eclampsia / pregnancy induced hypertension	
	IV. Pharmacology and Toxicology	13
	1. Alcohol and tobacco 2. Contraception 3. Drugs of abuse 4. Galactogogues 5. Gel dressings/nipple creams 6. Medication (prescription, over-the-counter, diagnostic and therapeutic procedures) 7. Medicinal Herbs	
	V. Psychology, Sociology, and Anthropology	21
	1. Transition to parenthood 2. Birth practices 3. Foods to eat/avoid that affect lactation 4. Employment – returning to work 5. Family lifestyle 6. Identifying support networks 7. Maternal mental health 8. Maternal psychological/cognitive issues 9. Mother-baby relationship 10. Safe sleep 11. Weaning 12. Cultural competency	

	International Board of Lactation Consultant Examiners (IBCLE) International Board Certified Lactation Consultant® (IBCLC®) Detailed Content Outline	# of Items
VI. Techniques		25
<ol style="list-style-type: none"> 1. Effective milk transfer (including medically-indicated supplementation) 2. First hour 3. Latching 4. Managing supply 5. Milk expression 6. Positioning 7. Refusal of breast, bottle 8. Skin-to-skin (Kangaroo care) 9. Test-weighing 		
VII. Clinical Skills		35
A. Equipment and Technology		
<ol style="list-style-type: none"> 1. Feeding devices (e.g., tubes at breast, cups, syringes, teats) 2. Handling and storage of human milk 3. Nipple devices (e.g., shields, everters) 4. Pacifiers 5. Pumps 6. Scales 7. Communication technology 8. Websites 		
B. Education and Communication		
<ol style="list-style-type: none"> 1. Active listening 2. Anticipatory guidance 3. Care plan development and sharing 4. Documentation 5. Educating mothers and families 6. Educating professionals, peers, and students 7. Extending the duration of breastfeeding 8. Emotional support 9. Empowerment 10. Group support 		
C. Ethical and Legal Issues		
<ol style="list-style-type: none"> 1. Breastfeeding in public 2. Clinical competencies 3. Code of Professional Conduct (CPC) 4. Principles of confidentiality 5. WHO code –advocacy and policy 		

	International Board of Lactation Consultant Examiners (IBCLE) International Board Certified Lactation Consultant® (IBCLC®) Detailed Content Outline	# of Items
D. Research		
1. Apply research in practice 2. Appraise and interpret research results 3. Use research to help develop policies and protocols		
E. Public Health and Advocacy		
1. Advocate for Baby-Friendly Hospital Initiative (BFHI) 2. Advocate for compliance with World Health Organization International Code of Marketing of Breast milk Substitutes (WHO Code) 3. Advocate for mother / baby in healthcare system 4. Develop breastfeeding-related policies		
Total Number of Items		175

Approximately half of the items will include images, and these will be administered in the afternoon session; items without images will be administered in the morning session. As supported by the practice analysis results, examination items should generally relate to the key tasks associated with developing a care plan, which include:

1. Assessment
2. Develop a plan
3. Document
4. Evaluate
5. Help mother determine goals
6. History taking
7. Work with other medical providers

Except for those items addressing general principles, items are classified according to the chronological period, using the following guidelines:

CHRONOLOGICAL PERIODS	Target # of Items*
1. Prenatal - maternal	8
2. Labor - maternal / birth - perinatal	9
3. Prematurity	12
4. 0 - 2 days	21
5. 3 - 14 days	21
6. 15 - 28 days	20
7. 1 - 3 months	12
8. 4 - 6 months	12
9. 7 - 12 months	5
10. Beyond 12 months	5
11. General principles (including preconception)	50
Total	175

*Appropriate flexibility will be allowed surrounding these targets.